

Professional Fire Fighters of Massachusetts

Affiliated with
INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS AFL-CIO-CLC
and
MASSACHUSETTS STATE LABOR COUNCIL AFL-CIO

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February 22, 1988

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Reverend Edward Boyle, S.J.
883 Hancock St.,
Quincy, MA 02170

Dear Father Boyle,

At our monthly meeting of the Professional Fire Fighters of Massachusetts held in Eastham, Mass., February 19, 1988, with over three hundred delegates in attendance, a motion was made and unanimously adopted "that the Professional Fire Fighters of Massachusetts submit the name of our late President T. Dustin Alward to be the labor recipient posthumously for this years Cushing - Gavin Award."

Dusty was a trade unionest in every sense of the word. He exemplified in his actions and deeds everything that a union official should portray.

We will be sending to you, in the very near future a resume and references on T. Dustin Alward.

Thanking you in advance for your time and consideration and with our best personal regards, we remain.

Fraternally and Respectfully,

ROBERT B. MCCARTHY,
President

PAUL M. LESTAGE,
Secretary-Treasurer

RBM:PML:e

555 MADISON AVENUE, 12th FLOOR
NEW YORK, NEW YORK 10022
(212) 751-5170 (212) 751-5175



All-American Collegiate Golf Foundation

BENEFIT: ALL-AMERICAN SCHOLARSHIP FUND

3 June 1988

Mr. Arthur R. Osborn
President
Massachusetts AFL-CIO
8 Beacon Street, 3rd Floor
Boston, MA 02108

Dear Arthur:

Our good friend, Robert A. Georgine, President of the Building & Construction Trades Department, AFL/CIO, will be presented with the Foundation's 1988 "Man of the Year in Labor" award at our 24th Annual Dinner at the Waldorf-Astoria on Tuesday evening, July 19th.

Bob's leadership in organized labor, coupled with his dedication and commitment to the goals of the Foundation have earned him the respect and admiration of his peers. His involvement in a variety of civic and charitable activities make him the ideal recipient for this prestigious award.

In addition to Bob, other outstanding individuals will receive awards for their achievements in the fields of business, education and entertainment. The proceeds from the Dinner will enable the Foundation to continue funding important scholarship programs and other vital youth-oriented charities.

Please join us in honoring Bob. At this time we'd like to give you an opportunity to participate before our official invitations go out. Tables of ten are \$3,000 - or individual seats are \$300 each. However, if you cannot participate by attending, you can pay tribute to him by taking an Ad in our Dinner Journal. The enclosed rate card will give you all the details.

I look forward to your joining us on July 19th.

Sincerely,

WILLIAM DENIS FUGAZY
General Chairman

WDF:kp

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*The All-American
Collegiate Golf Foundation
24th Annual Awards
Dinner*

*555 Madison Avenue, 12th Floor
New York, New York 10022*



*The 24th Annual All-American
Collegiate Golf Foundation Awards
Journal Advertising Rate Card*

Contribution

<input type="checkbox"/> \$3,500	<i>Page Size</i>
<input type="checkbox"/> \$3,000	<i>Back Cover</i>
<input type="checkbox"/> \$2,500	<i>Inside Covers</i>
<input type="checkbox"/> \$2,000	<i>Page 4-Color</i>
<input type="checkbox"/> \$1,250	<i>Page B&W</i>
	<i>½ Page B&W</i>

Mechanical Requirements

<i>Page Non-Bleed</i>	<i>7" x 10"</i>
<i>Page Bleed</i>	<i>8½" x 11"</i>
<i>Page Trim</i>	<i>8½" x 11"</i>
<i>½ Page Non-Bleed</i>	<i>7" x 4¾"</i>

NOTE: On bleed ads, keep type ½" from bleed edges.

Printing: Offset 133-line screen. Supply camera-ready art and mechanical or offset negative-right reading emulsion side down. Advertisers will be billed for color separations or special art or typesetting not provided.

Deadline For All Materials: June 15, 1988.

Extensions only by special request.

Name _____

Company _____

Address _____

Telephone _____

Please make checks payable to:

THE ALL-AMERICAN COLLEGIATE GOLF FOUNDATION.

For additional information, call Kate Petrillo, (212) 751-5170.

**MAIL TO: THE ALL-AMERICAN COLLEGIATE GOLF FOUNDATION
555 Madison Ave., 12th Floor
New York, New York 10022**



EXECUTIVE OFFICERS MEETING
JUNE 16, 1988

PRESENT: PRES. OSBORN, SEC.?TREAS. HAYNES AND EXEC. V.P. FAHERTY
ABSENT: EXEC. V.P. LYDON AND EVER.

MMS TO PURCHASE TWO TICKETS TO EDWARD J. MCELROY, JR. - RHODE ISLAND AFL/CIO AWARD FOR COMMUNITY SERVICES. SO VOTED.

MMS TO FILE REQUEST TO PURCHASE TICKETS FOR ROBERT A. GEORGINE, PRESIDENT OF THE BUILDING TRADES DEPT., AFL/CIO - MAN OF THE YEAR AWARD FROM THE ALL AMERICAL COLLEGIATE GOLF FOUNDATION. SO VOTED.

MMS TO PURCHASE A TABLE FOR THE DINNER HONORING RALPH ARIVELLA, JOHN GRIFFIN AND PHIL MOORE, \$25 PER PERSON. SO VOTED.

MMS TO SEND A LETTER OF ENDORSEMENT OF THE BOYCOTT FOR THE CITY OF HOPE TO OPEIU LOCAL 6 AND A COPY OF THE LETTER FROM RICHARD LANIGAN, BOYCOTT COORDINATOR, LOCAL 6 TO EXEC. V.P. FAHERTY. SO VOTED.

MMS TO SEND \$100.00 TO PARENTS UNITED FOR CHILD CARE FUNDRAISER. SO VOTED.

MMS TO SEND CHERYL GOODING, WILD CO-ORDINATOR \$250.00 FOR SCHOLARSHIP AND VIDEO TAPING EXPENSE. SO VOTED.

MMS TO HAVE PRES. OSBORN HANDLE THE CONFLICTING REQUEST RE: CUSHING- GAVIN AWARD. SO VOTED.

Exec.
of.



RHODE ISLAND AFL-CIO

194 SMITH STREET • PROVIDENCE, RHODE ISLAND 02908 • 751-7100

AWARDS DINNER

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William F. Tammelieo

Dear Friends,

On behalf of the Rhode Island AFL-CIO Community Service Awards Committee, I am writing to ask you to join us in honoring the first recipients of the **Edward J. McElroy, Jr. Rhode Island AFL-CIO Award for Community Services**.

This award was created in recognition of Ed's longstanding concern for the community and his willingness to expend his time and effort in order to make Rhode Island a better place to work and live. This award will also give all of us an opportunity to express our pride for how he has represented the labor movement in the many community activities he has undertaken. Over the years, Ed has been a member of the United Way Board of Directors, the labor chairman for the Rhode Island Chapter of the American Heart Association, the Shamrock chairman for the Muscular Dystrophy Association, an original Board member of the Narragansett Bay Commission, a member of the Board of Rhode Island Credit Union League, and a member of the Workforce 2000 Board.

By joining with us on this first annual awards night, you will have an opportunity to show your appreciation and support for the first three recipients of this award. They have been chosen because they all have demonstrated a concern for their community and a willingness to volunteer their time, effort, and skills to its improvement.

The first recipients of this award are William F. Fitzgerald, vice president and business representative of United Food and Commercial Workers Local 328; Marcia Reback, president of American Federation of Teachers Local 958; and Michael R. Boyce, president of United Steelworkers of America Local 15509.

The first annual Rhode Island AFL-CIO Community Service Awards Dinner will be held on Thursday, June 23, 1988 at the Omni Biltmore Hotel in Providence. There will be a cocktail reception from 6:30 - 7:30 p.m., and a dinner will be served at 7:30 p.m. Tickets are \$30.00 per person.

Please make your checks payable to the Rhode Island AFL-CIO and return them with the enclosed card by June 16 to the Rhode Island AFL-CIO, 194 Smith Street, Providence, Rhode Island 02908.

I hope you will take the time to join us at this special event.

Sincerely,

Frank Montanaro
Chairman

**Rhode Island AFL-CIO Community Services
Awards Dinner**

**Thursday, June 23, 7:30 p.m. dinner
Please reply by June 16, 1988**

Yes, I will attend
Number of guests _____

Enclosed is my donation of \$_____
payable to the Rhode Island AFL-CIO

Returns to: AFL-CIO Community Service Awards Committee
194 Smith Street
Providence, Rhode Island 02908



**Rhode Island AFL-CIO Community Services
Awards Dinner**



Thursday, June 23, 1988
Omni Biltmore Hotel • Ballroom
Providence, Rhode Island

Cocktail reception 6:30-7:30 p.m.
Dinner 7:30 p.m.

Donation: \$30.00 per person

**Rhode Island AFL-CIO Community Services
Awards Dinner**



Thursday, June 23, 1988
Omni Biltmore Hotel • Ballroom
Providence, Rhode Island

Cocktail reception 6:30-7:30 p.m.
Dinner 7:30 p.m.

Donation: \$30.00 per person

725

726



EX
OFF.

VIRGINIA STATE AFL-CIO WORKERS' ASSISTANCE PROGRAM, INC.

3315 West Broad Street, Richmond, Virginia 23230-5089, Phone (804) 355-7444

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REMINDER OF OUR PREVIOUS CORRESPONDENCE TO YOU

July 15, 1988

TO: Friends and Supporters of the Virginia State AFL-CIO WAP
and Dr. Ronald I. Dozoretz

FROM: David H. Laws, Chairman
Daniel G. LeBlanc, Secretary-Treasurer

SUBJECT: First Biennial Virginia State AFL-CIO Paul A. Askew Community Services Memorial Award

At the Virginia State AFL-CIO's Silver Anniversary Constitutional Convention this August in Norfolk, Virginia a very special event will occur, and we would very much like your participation in making it a success.

On Friday, August 19, we will have a banquet to honor an individual with the First Biennial Virginia State AFL-CIO Paul A. Askew Community Services Memorial Award. The honoree will be Dr. Ronald I. Dozoretz, a tidewater physician, businessman and philanthropist who has played a major role in helping to establish the Virginia State AFL-CIO's Workers' Assistance Program. The WAP is a non-profit service designed to assist workers and family members experiencing alcohol, emotional or drug related illnesses. All proceeds from the banquet will go to help fund expansion of the program.

You can help make our banquet a success by purchasing tickets to the banquet and by advertising in our dinner program. We have enclosed a reply form for tickets and rate sheet for advertising.

Dr. Dozoretz is uniquely deserving to be the first recipient of the Askew Award. Your support for this tribute to him is truly a worthwhile cause, and we eagerly look forward to your participation in making the presentation of the First Biennial Paul A. Askew Community Services Memorial Award a success.

We are looking forward to hearing from you with a positive response to attend this dinner and purchase an ad, which is tax deductible.

DHL:DGL:dir
Enclosure
OPEIU 334, AFL-CIO



REPLY FORM

VIRGINIA STATE AFL-CIO

BIENNIAL PAUL A. ASKEW COMMUNITY SERVICES MEMORIAL AWARD BANQUET

AD BOOKLET

_____ Full Page Ad @ \$300.00

_____ Half Page Ad @ \$150.00

_____ Quarter Page Ad @ \$75.00

_____ Patron -- \$500

BANQUET

Please reserve _____ tickets @ \$35.00 per ticket.

Please reserve _____ tables @ \$350.00 per table.

* * * * *

Name _____

Organization _____

Address _____

Phone No. _____

Please make checks payable to the Virginia State AFL-CIO Workers' Assistance Program, Inc. (Attention Local Unions: Do not include with per capita payments.) Mail to Virginia State AFL-CIO, 3315 W. Broad Street, Richmond, VA 23230, Attention: Paul A. Askew Memorial.

* * * * *

DEADLINE FOR ADS AND/OR TICKETS -- AUGUST 1, 1988.

The Virginia State AFL-CIO Workers' Assistance Program, Inc. is a non-profit 501 C 3 organization. Contributions are tax deductible.



Massachusetts Health Data Consortium, Inc.

400-1 Totten Pond Road • Waltham, MA 02154 • 617 890-6040

A Brief Background

The Consortium was founded as a nonprofit coalition in 1978 by the public and private health care organizations of the Commonwealth of Massachusetts to develop a system for collecting, organizing and disseminating data on all hospital care in the state.

The Consortium collaborates with businesses, hospitals, universities, and government officials to conduct public policy studies and sponsor specialized educational programs for health care professionals. Some recent examples of the work of the Consortium include:

- ** **The “Hospital Price Guide”**, a comparative report on hospital charges, was prepared with the Massachusetts Business Roundtable. The Guide was developed to assist corporate benefits managers in redesigning benefit package plans, to educate employees on health cost issues, and to encourage carriers to monitor differences in hospital charges. (Funded by the CIGNA Foundation.)
- ** **Population groups-at-risk** will be monitored to assess annually changes in their health care which are due to their medical or socioeconomic characteristics and changes in the reimbursement systems. The system will monitor health care quality, access and cost for the at-risk groups. (Funded by Fidelity Non-Profit Management Foundation and the Boston Foundation.)
- ** **HealthMart**, an annual conference and exhibition for corporate benefits managers and regional business coalitions provides an opportunity to review the latest programs in health promotion and cost containment.
- ** **AIDS hospitalizations data** were turned over to the Massachusetts Senate Post Audit Committee for its study on workplace issues. The Consortium study revealed that 50% of the cases are paid by employer-sponsored insurance plans.
- ** **The Baseline Report Series** allows health insurance companies and managed health care plans to select hospitals with data on efficiency, performance and market share. Hospital administrators use these same reports when planning hospital expansion or the introduction of new services.
- ** **An employer information network** is in the planning stages with the Merrimack Valley Business Group on Health. Their data base will be used to develop quality of care indicators for health services that they purchase.
- ** **Medicaid Access** concerns led Governor Dukakis and the Massachusetts Medical Society to enlist the Consortium to monitor and report on the number of doctors accepting Medicaid patients. The purpose was to help assure that at least 85% of Massachusetts physicians participate in the Medicaid program to provide adequate care for the poor.
- ** **Hospital competition** will be studied by the Consortium with a leading health care economics firm. For this study, the Consortium will construct market areas in five states, measure the concentration and competition of hospitals and assess the effects on utilization and performance (funded by the Center for Health Economics Research and the Department of Health and Human Services).

- ** **DRGs** are the new language of the federal reimbursement system. When Medicare and Medicaid regulations were drastically changed, the Consortium sponsored seminars to train hospital staff about DRGs. With this support, hospitals have more readily adjusted to these changes and kept their medical systems functioning smoothly for patients.
- ** **Coronary Heart Disease** in Massachusetts, a study recently completed by the Consortium (funded by the Jessie B. Cox Foundation and the Robert Wood Johnson Foundation); and the feasibility of a monitoring system of long term care for the elderly (funded by the Retirement Research Foundation).
- ** **Community health centers** in Boston use the Consortium's data to assess the health needs of the elderly in their neighborhoods and to plan for appropriate services.
- ** **Rehabilitation services** were examined by the State Office of Health Policy when they suspected that some patients in acute care hospitals could be moved to other settings. They used Consortium data to identify the magnitude of the problem.
- ** **The Massachusetts Board of Registration in Medicine** asked the Consortium to automate its information on licensed physicians to assist the Board in its investigations of malpractice cases.

Corporate Contributors

In addition to the support from its members and collaborators, the Consortium has received financial assistance in the form of contributions from the following corporations in the first two years of the Transition Fund Campaign:

Bank of Boston	New England Telephone
Bank of New England	Norton Company
Boston Edison Foundation	Parker Brothers
The Boston Globe	Polaroid Corporation
Fidelity Non-Profit Management Foundation	Raytheon Company
John Hancock Mutual Life Insurance Company	Shawmut Corporation
Kendall Company	Stone & Webster
June Rockwell Levy Foundation	Unitrode Corporation
Liberty Mutual Insurance Group	Zayre Corporation
The New England	

The Massachusetts Health Data Consortium is a non-profit, 501 (c) (3) private corporation.

PROFILE: 1987

An Annual Prospectus

MASSACHUSETTS HEALTH DATA CONSORTIUM, INC.
a non-profit, 501 (c) (3) private corporation

The Massachusetts Health Data Consortium was founded in 1978 by the state's major public and private health care organizations out of a recognition of the need for a neutral agency, an "honest broker," independent of special interests, to collect, analyze and disseminate sensitive health care information.

The Consortium is suited both politically and technically as a focal point for examining the costs and rates of utilization of health and medical services.

Politically, the unique composition of the Consortium's membership provides the necessary leverage to obtain and disseminate sensitive data about patient groups, physicians and hospitals. All interested parties are represented in the process of developing and using data.

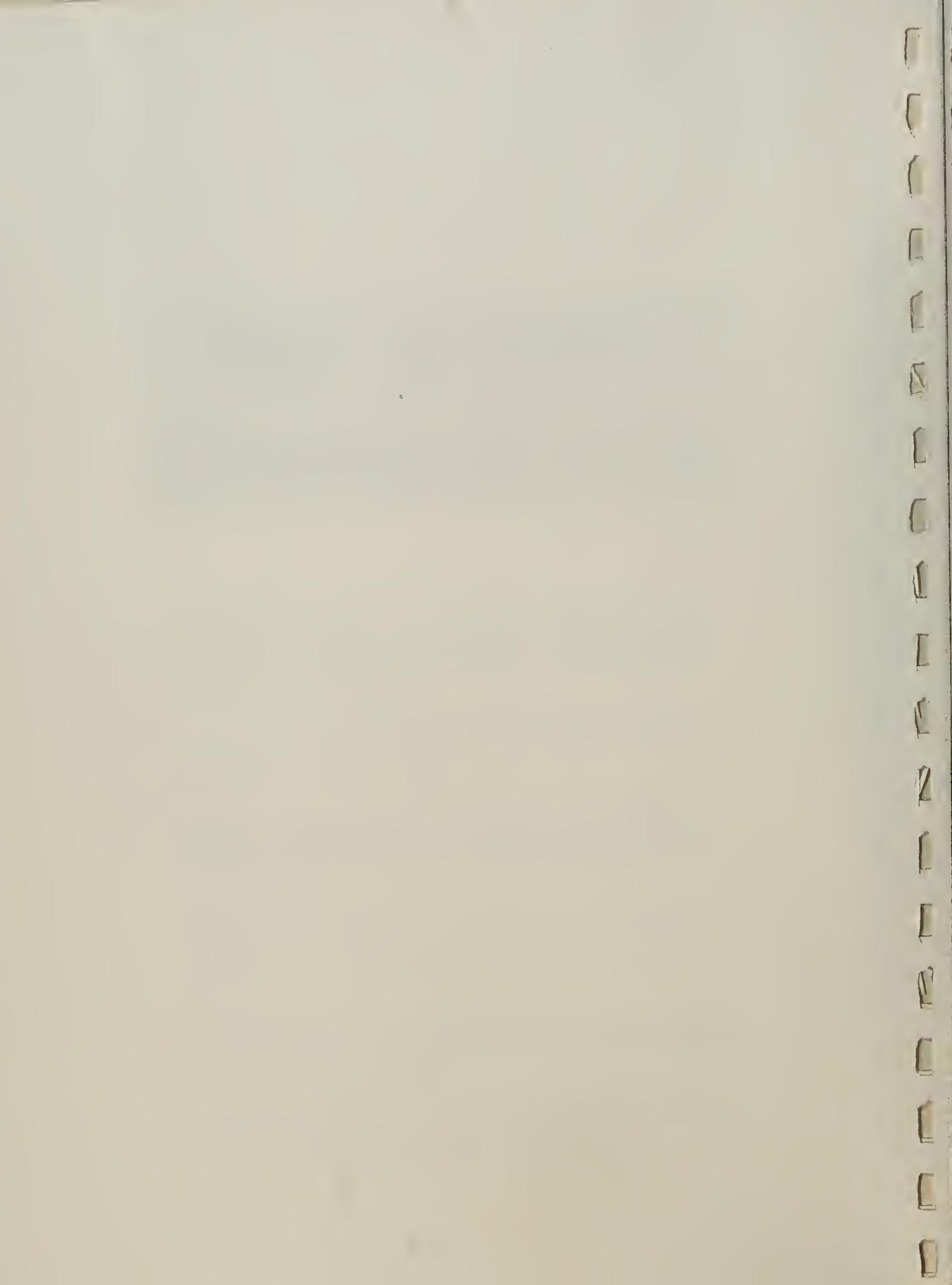
Technically, the Consortium has achieved national recognition for pooling large amounts of hospital data and editing them for accuracy. Annually, the Consortium adds a million records to its files for comparative reporting.

The Consortium also works with clients on a confidential basis to help them organize and manage their health data. These clients rely on the Consortium's experience in merging data from different sources and formats into uniform data systems.

The Consortium's professional staff realizes that what managers need is not more data, but better "information" products and useable "intelligence" that will improve the climate of decision-making.

PROFILE: 1987

An Annual Prospectus



PROFILE: 1987
AN ANNUAL PROSPECTUS

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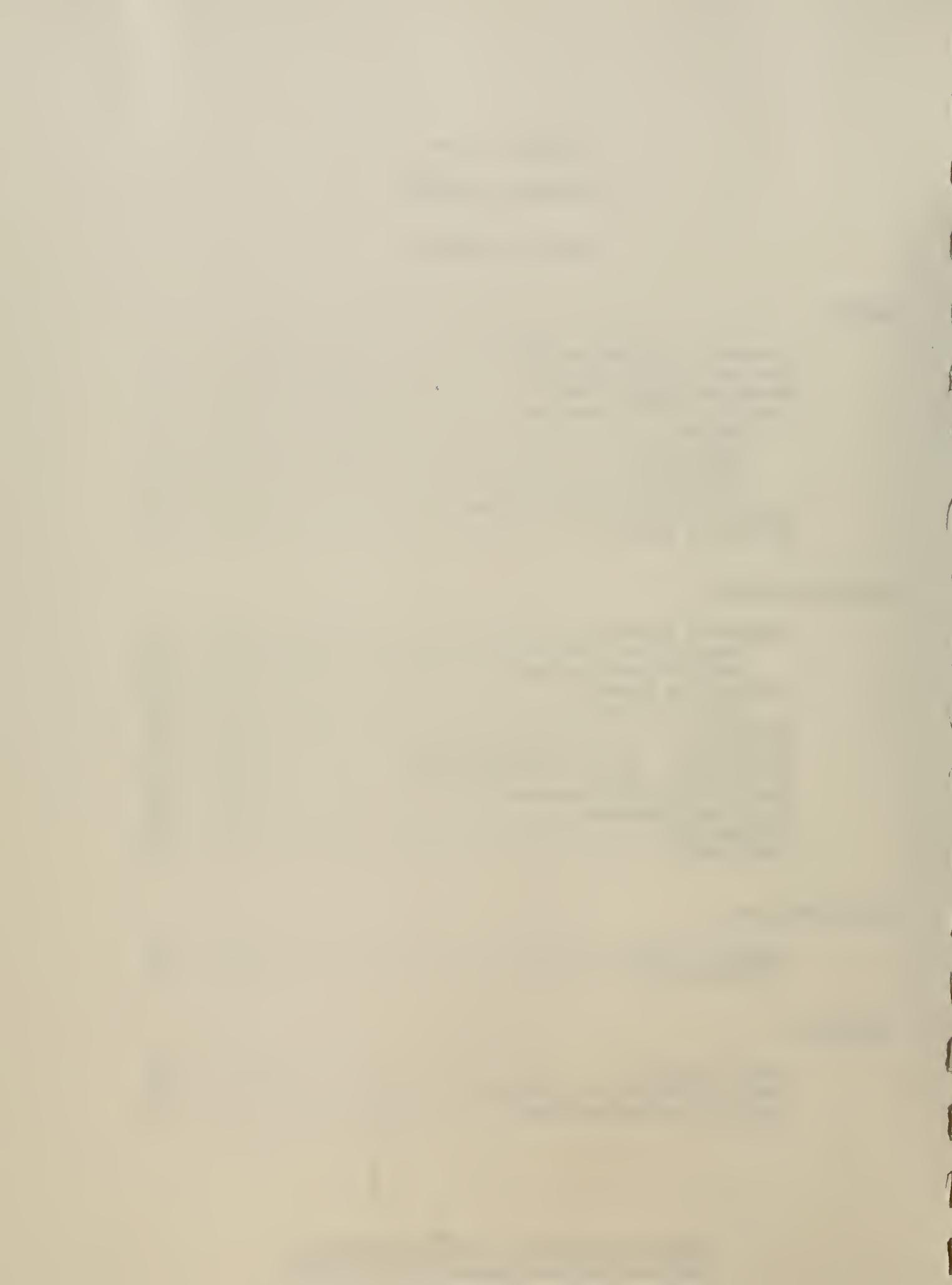
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STATEMENT OF PURPOSE AND GOALS

The Consortium was initially funded by the National Center for Health Statistics in 1978 to develop and operate an integrated health data base for the state. The Consortium now operates independently of federal funding and services health planners, providers, regulators, employers, insurers, scholars and other interested parties as a centralized resource for hospital-specific and other population-based health data. In response to constituents' needs, the Consortium has steadily broadened the range of its efforts in three areas: independent research; collaborative research; education.

Independent Research

Non-partisan and non-profit, the Consortium initiates projects which might not be undertaken by any one sector or agency and which may require a high degree of cooperative effort. The Board of Directors, representative of the major sectors of the health care community, determines the annual direction of independent research. Results, in the form of published report series, constitute a core package of services received by Consortium members in return for their annual dues. Each year over 150 hospitals in Massachusetts and New England contribute data on their inpatient admissions which comprise the Consortium's principal data base.

Collaborative Research

The Consortium contracts with both members and non-members to execute customized data studies. Experienced in the management and integration of diverse data elements, Consortium technical staff provides data management consulting services on study design, final output formats, systems design, and programming.

Special studies are usually initiated by outside agencies and the data collected are the property of the agency funding the study. The Consortium always encourages its collaborators to pool new data for the benefit of all the members. Occasionally the Consortium itself will seek out appropriate collaborators for a project that appears to have implications for all members or represents an innovative approach to the presentation and analyses of health data.

Education

The Consortium performs a unique educational function through its sponsorship of conferences and workshops featuring prominent local and national figures speaking on new data uses and methodologies. The Annual Meeting, organized around a major current health policy theme, traditionally draws over 200 people. Individual Consortium staff members are often invited to make presentations to both local and national groups as well as to discuss research findings at Consortium sponsored functions.

PRESIDENT'S ANNUAL REPORT 1987

The Massachusetts Health Data Consortium has had a long and abiding commitment to education and to raising the level of awareness of the public and the health professions in the areas of health policy, planning, and management issues.

We ask ourselves what the information needs are at present and will be in the short range and long range future for effective planning, program implementation, and resource utilization to meet some real blockbuster problems looming on the horizon.

First: AIDS - A recent report in the New England Journal of Medicine indicates that there are thought to be 500,000 people infected with the immune deficiency virus in NY City. Of the 40,000 cases of clinical AIDS, 10,000 of them reside in NY City where AIDS is the leading cause of death for men in the 25-44 age group and women in the 25-34 year age group. The cumulative case fatality rate is 58% and of persons in whom AIDS was diagnosed before 1983, 87% are dead at the present time. Sixty percent of the 200,000 intravenous drug abusers are thought to be sero positive for the AIDS virus blood test. The Center for Disease Control in Atlanta estimates that there are 100,000 AIDS related complex patients in NY City. In view of these statistics, the future needs for hospital beds in NY City will be staggering. By 1991, 25-50% of the 27,000 medical/surgical beds in NY City will be occupied by AIDS patients, whereas only 5% of these beds are presently occupied by AIDS patients.

It is obvious that data and information for planning purposes for this epidemic, which is already upon us, is essential. Hesitation on the part of health sector and the medical profession is not the message to send to an already fearful general public. It is probable that anger and indignation will be directed towards the AIDS patients and the medical profession and health industry by the public at large. It is absolutely essential that we care for these problems through more effective case identification techniques and case monitoring of those that are already identified, so that a meaningful data base can be developed for future planning purposes. If you think health costs are a problem now, just wait!

Second: The care of the elderly - the elderly are the fastest growing segment of our population. Three-quarters of health expenditures occur in the last six months of life. The elderly are seven to twenty times greater utilizers of health care than the general population. Of the elderly who are admitted to intensive care units, only above half are alive and well three months after their intensive care unit admission. Not much is known about the extent of health problems of the elderly and of the nature and character of those problems which are unique to the elderly. There is a pressing need for a long term care data base for monitoring and eventually planning and tooling up for this tip of the iceberg on the horizon. What are their support systems? What are their acute care needs? - their chronic care needs? - their custodial care needs? The present commitment of social agency funds to this problem is tremendous and probably not enough!

Third: Trauma - Last year, 742 people died on the highways of Massachusetts, and about a third were alcohol related. There is no statewide trauma system.

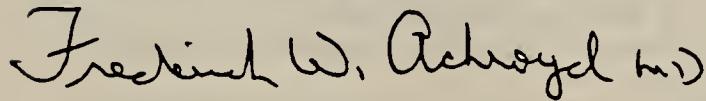
Only one-half of the pre-hospital sector has basic emergency medical technician and basic life support training. Trauma registries are extremely valuable, because they help us focus on those patients in whom intervention will make a difference in the outcome. For example, of all trauma patients, five percent are victims of severe trauma and usually die where they fall. Another fifteen percent die in the first four hours, and the remaining eighty percent are going to survive, due to moderate extent of trauma and, with good care, get well. Therefore, it is this middle group of fifteen percent of all trauma patients who die in the first four hours, in whom timely and effective intervention makes the difference in saving a life and preventing serious long term impairment and disability. We need to get the right patient to the right facility in as timely a fashion as possible. This is the most cost-effective approach to trauma care.

There are very simple data requirements that could be obtained from a trauma registry, which would permit us to track patients within the State and find out where they come from, how did they get injured, where were they first treated, and where did they finally end up, and what was the outcome? Were there delays? Was the care appropriate? Was an autopsy done on all deaths? In other words, what are the real trauma problems that are being effectively managed, and what problems need to be addressed and solutions developed?

The same comments could be made about the need for statewide epidemiologic studies of illness, which would help us understand small area variations in diseases and rates of medical and surgical intervention. What is the severity of illness of patients in different hospitals? Are the staffing patterns and outcomes appropriate?

In summary: There are tremendous information needs which, if met, would enable the planners and providers of health care in Massachusetts to proceed to accomplish our social goals of universal access to cost effective quality care. The Massachusetts Health Data Consortium is dedicated to asking the right questions, to come as close to accurate and valid answers as we can. There is considerable ferment and healthy tension among the diverse members in the Consortium, which is very productive. We need the expertise and point of view of state government and their planners; the third parties for creative incentive models; the health profession for the hands-on practical skills to get the job done. We believe that the consensus building process adds to the quality of the information that we provide. Join with us as we tackle these questions. We need your help, and it will guarantee the quality of the product.

Respectfully Submitted,



Frederick W. Ackroyd, M.D.
President
Massachusetts Health Data Consortium, Inc.

Executive Director's Report
(September 1, 1986 to August 31, 1987)

Each year at this time we reflect on the accomplishments of the previous year and set objectives for next year. The Annual Report is never a time to be modest. Frank J. Manning, founder of the Massachusetts Association for Older Americans once said: "Everybody has to have a little vanity, a little pride in order to have the incentive to do worthwhile things." The Consortium is certainly justified in being proud of a year of considerable activity.

We are proud about our work on the Hospital Price Guide which brought the Consortium extensive media coverage both locally and nationally. It represented one of the few times in 10 years that the Consortium staff came out from behind the scenes.

We are proud to be helping employers as purchasers of health care. These groups are becoming more sophisticated in using data to manage their costs. Their focus is now shifting to setting objectives for quality and cost-effective care.

We are proud of the scores of people—our members, directors, contributors, research collaborators, clients—who feel that we are doing the "worthwhile things". Their sustaining support also comes with an encouragement to set high expectations for the Consortium.

We thank over 150 hospitals from around New England whose data we use to describe trends in utilization and cost. We have observed a dramatic improvement in the quality of these hospital data over 10 years.

In this our 10th anniversary year, we celebrate the growing diversity of the Health Data Consortium's members, collaborators and clients. Each year our annual Meeting and other conferences attract a diverse mix of managers from business, labor, hospitals, HMOs, insurance companies, government and academia.

This year the Massachusetts Association of Community Health Agencies became a member and we will prepare what we hope will be an annual profile of Home Health Care in Massachusetts.

We celebrate the opportunity to collaborate with so many public-spirited individuals. Ten years after Paul Densen encouraged the Consortium staff to ask "what is the question?" we are helping more researchers answer more questions. For example:

- Dr. James Dalen, Chairman of Medicine at the UMass Medical Center and Dr. Francis Moore of Harvard will soon release findings from our data base on trends in the treatment of coronary heart disease.
- The Mass. Senate Post Audit Committee cited our research on AIDS. The Consortium report identified that:
 - * More than 50% of the AIDS cases were insured by employer sponsored plans (i.e., Blue Cross, Commercial, HMO)
 - * Medicaid alone, however, paid for 24% of all cases
 - * 72% were residents of Greater Boston
 - * 74% were treated in 8 Boston hospitals
 - * \$6.5 Million was spent for inpatient charges

This AIDS report will be updated annually.

- Senator Kennedy's office requested a study on high cost hospitalizations for infants with bills over \$30,000. The study revealed that:
 - * 63% were covered by employers (Blue Cross, Commercial, HMO)
 - * 23% were paid by Medicaid
 - * 20% were out-of-state children
 - * Total hospitalization costs were \$57 million (with an average charge of \$75,000)
- We have received a major contract with the Center for Health Economics Research to collect data from four other states and describe the market areas in Mass., California, Illinois, Tennessee and Washington. We will then determine the degree of competitiveness among the hospitals in those states.
- Another major grant underway with the Health Planning Council for Greater Boston will monitor groups-at-risk due to changes in the federal/state health care reimbursement system. This study is supported by the Boston Foundation and the Fidelity Non-Profit Management Foundation.
- In January we will announce a major collaboration with Simmons College to study the Mass. Health Care Economy.

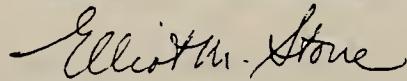
We celebrate these and scores of other studies completed since 1978 and thank you for retaining confidence in our credibility.

On the fiscal side, we celebrate our self-sufficiency without direct federal funding. With the urging of our Treasurer, John Crosier of the Mass. Business Roundtable, we have expanded the number of our Hospital Utilization Reports. Next year, in addition to the Hospital Price Guide our new products in development will include a book evaluating second opinion, utilization review and other cost containment programs for employers; also an extensive conference series is planned for employers.

John Larkin Thompson, President of Blue Cross Blue Shield helped us convey this message about new products to corporations and we raised over \$100,000 in contributions. We certainly celebrate that achievement!

In closing, I would like to welcome Dr. Frederick Ackroyd as the third President of the Consortium. Dr. Ackroyd is a full time surgeon at the Massachusetts General Hospital. He also holds an MBA and a Masters in Public Administration. Dr. Ackroyd has participated in a multi-hospital study on physician practice patterns. We are grateful that Dr. Ackroyd has agreed to assume the Presidency and to continue a 10 year tradition of exceptional leadership set by Dr. Paul Densen and by Dr. Francis Moore. In honor of Dr. Moore's six years as President, a complete set of Reports has been donated to the Countway Library at Harvard and to the Simmons College Library.

Respectfully submitted,



Elliot M. Stone

SUMMARY OF FY 1987 ACTIVITIES

I. PROGRAMS

A. Independent Research

A core package of "Baseline" reports were made available to the members and the general public using the FY 1985 data base. Simultaneously, the staff revised the process of acquiring hospitals' FY 1986 data. The Consortium received most hospital data from the Mass. Rate Setting Commission which provided its public use tape (Level I data). In order to build a population-based file, the Consortium also obtained data from border states (ME, NH, CT, RI, NY) for Mass. residents hospitalized outside the state.

Monies from the Transition Fund campaign were used to improve the catalog of baseline reports, develop a new catalog and other materials.

Three new reports were released using the FY 1985 data base: Per Diem Analysis; 3 Year Payor Analysis and 3 Year Market Position Trend Analysis.

Among the current reports, the most popular continue to be Market Share by Clinical Specialties, Patient Origin, as well as Charges by DRG. A new hospital specific report displaying average charges by DRG and Payor was market tested and will be released in the next fiscal year.

Several new subscribers joined the On-Line Access system. The FY 1985 data base is now available from our collaborator, Data Resources, Inc. (DRI is a firm nationally known for its large economic data bases). Clients may "dial-up" and download two years of data (FY 1984 and FY 1985) to their own personal computers.

The design and implementation of the "Hospital Price Guide" was completed just as the fiscal year closed. A major press conference is planned.

The Health Insurance Association of America assisted the Consortium with a nationwide mailing of "Health Care Tabs".

Sales from the Baseline Reports and On-Line Access were \$192,609 in fiscal 1987, an increase of 42% over the previous year.

In addition to building the annual data base and producing reports, the Consortium also conducted its own research in several areas in FY 1987: coronary heart disease, long term care data, hospital price data and the feasibility of an ambulatory care database.

The second and final year of the Coronary Heart Disease study was carried out with funding from the Jessie B. Cox Charitable Trust, the Robert Wood Johnson Foundation and the Walnut Charitable Trust. The study is directed by Dr. Francis Moore. Dr. James Dalen, Acting Chancellor of the University of Massachusetts School of Medicine is Chairman of the Advisory Panel.

Dr. Robert Morris coordinated a working group investigating the feasibility of creating a long term care data base. A proposal was submitted to a private foundation in collaboration with Dr. Marilyn Moon of The Urban Institute in Washington, D.C. and Professor Allan Meyers of the Boston University School of Public Health. The proposed project would create a longitudinal data base to study whether elderly patients have been discharged "quicker and sicker" from hospitals.

Legislation (H4540) was filed to advocate a demonstration long term care data base project.

The Consortium requested that the Rate Setting Commission release physician data currently available but not accessible on their case mix and charge data base.

An Annual Research agenda was prepared for the Board to prioritize the independent projects.

B. Collaborative Research

Several new projects were initiated in fiscal 1987:

Reports were prepared for the Mass. Senate Post Audit Committee on AIDS hospitalizations.

The U.S. Senate Finance Committee requested assistance with its study on high cost hospitalizations for infants.

The Boston University School of Management studied an alternative method to price DRGs. Under the direction of Professor Michael Schwartz, the project merged cost report data with case mix and charge data.

The Millipore Corporation contracted with the Consortium to design an employee survey on attitudes toward benefit design, cost containment and health promotion.

The Upjohn Company used the Consortium data base for a post-marketing drug study.

The National Center for Health Services Research has added the Consortium's data base to its Hospital Utilization Studies.

Other collaborative studies continued in fiscal 1987:

A study of Outpatient Cardiac Catheterization with Dr. Peter Block at the Massachusetts General Hospital under a grant from the Blue Cross/MHA Fund.

A series of reports on Physician Participation in the Medicaid Program for the Massachusetts Medical Society. Reports are presented on a regular basis to a working group of: legislative staff, consumer advocates, Medicaid staff, the Medical Society and Executive Office of Human Services. The Consortium merges data files from the Board of Medicine, Medicaid, Folio Associates and the Medical Society to create the reports.

Small Area Analysis studies were extended with current data in surgery, DRGs, and for elderly age groups. Charles L. Donahue, Jr., of the Health Planning Council for Greater Boston is the principal investigator.

Revenues from Collaborative Research in fiscal 1987 were \$152,177 a decrease from last year. Collaborative proposals written in FY 1987 included:

- Study the Effects of Competition on Population-At-Risk to the Boston Foundation and Fidelity Foundation (funded)
- Market Area/Hospital Competition for Five States to ASPE, HHS (funded)
- Superfund to build capacity at the DPH (not funded)
- Employee Satisfaction Survey to Millipore (funded)
- Develop Quality of Care Indicators with Employers and Carriers to the CIGNA Foundation (not funded)
- Develop Coded Physician Identifier for the Board of Registration in Medicine to the Mass. Medical Society (pending)

C. Conferences

In fiscal 1987, the Consortium sponsored six of its own conferences.

The conference topics and speakers included:

"The Hospital Computer Applications Exhibition on Cost Accounting"

Allen A. Krause (Worcester Memorial Hospital); Stephen Hegarty (Massachusetts Hospital Association); David W. Young, DBA (Boston University School of Management).

Five Vendor Demonstrations were held in conjunction with these speakers.

"Monitoring the Effects: Environmental and Occupational Health, Establishing Massachusetts Priorities"

Francis D. Moore (Mass. Health Data Consortium); Bailus Walker, Jr., Ph.D., M.D. (Mass. Department of Public Health); Eric Frumin (Amalgamated Clothing and Textile Workers Union); Michael Deland (U.S. Environmental Protection Agency, Region I); Paul Romary (State Senate); Barkev Siroonian (OSHA); Robert Spinney (Mass AFL-CIO); William R. Gaffey, Ph.D. (Monsanto Company); David Gute, Ph.D. (Mass. Department of Public Health).

"MedCom '86: Fourth Computer Exposition for Physicians and Other Health Care Professionals"

Eleven Executive Briefings were held in conjunction with exhibits by over 40 vendors.

"The New Imperative for Effective Health Quality Measurement"

Richard H. Egdahl, M.D., (Boston University Medical Center); Peter O'Donnell (RCA Corporation); Larry L. Smith (New England Medical Center); Tera Younger (Mass Peer Review Organization).

"Risk Management and Quality Assurance Programs"

Paula Gold (Executive Office of Consumer Affairs & Business Regulations); Ellison C. Pierce, Jr., M.D. (JCAH Risk Management Advisory Panel); Ralph A. Deterling, Jr., M.D. (Mass. Board of Registration in Medicine); Stephen M. Davidson, Ph.D. (Boston University Health Management Program); Representative Marjorie A. Clapprood; Karol Joseph (Mass. Hospital Association); Magda Peck, D.Sc. (MassPRO); Robert H. Russell, Esq., (Board of Registration in Medicine); Marion Knapp (Harvard Health Plan, Inc.); James V. Divver (Mass. Department of Public Health); James M. Redmond (Hospital Association of PA); Mark A. Moskowitz, M.D. (University Hospital).

"The First Annual Seminar on Competitor Analysis"

Pam Corradino (Lahey Clinical Medical Center); Fred Grose (Impac, Inc.); David H. Gleason (Gleason Micro-Consultants); Deborah D'Arpa (Mass. Health Data Consortium); Judy Hybels (Data Resources, Inc.)

Conference revenues for fiscal 1987 were \$90,795, a decrease of \$2,447 from last year.

D. Program plans for next year:

Independent Research for 1987/1988:

- Release of FY1986 data and compilation of FY '87 data base
- Investigate supplementing tabular reports with map atlases.

- Publish Hospital Price Guide with 1986 data
- Articles on Coronary heart Disease Study
- Resource Guide for Employers to Evaluate Cost Containment Programs

Collaborative Research in 1987/1988:

- Populations-At Risk Study (Elders, Children, Uninsured) with the Health Planning Council
- Market Area/Hospital Competition Study with the Center for Health Economics Research
- Medicaid Access studies with the Massachusetts Medical Society
- Small Area Variation studies with the Health Planning Council for Greater Boston (HPCGB)
- Preventable Disease studies with the HPCGB
- Home Health Care in Mass.
- Drug Company studies
- Physician and Nursing Demographic studies
- AIDS
- Studies on the Mass. Health Care Economy with Simmons College
- High Cost Infants

Conferences Planned for 1987/1988:

- Health Policy Series with Media Co-Sponsors
- HealthMart '88 for Employee Benefits Managers
- MedCom '88 Exhibit on Office Technology for Physicians, Dentists
- Competitor Analysis (Annual User's Meeting)

II. Operations

A. Membership

The Board approved membership for the Massachusetts Association of Community Health Agencies.

Meetings to discuss membership were held with the AFL/CIO, the Mass. Municipal Association, the Dept. of Elder Affairs, the Mass. League of Community Health Center and the Mass. Nurses Association.

The Board of Directors met five (5) times: October 7, 1986; December 2, 1986; January 6, 1987; March 6, 1987; and May 5, 1987.

The Executive Committee met six (6) times: September 16, 1986; November 20, 1986; February 12, 1987; April 7, 1987; June 2, 1987; and July 7, 1987.

The Technical Review Committee meetings are scheduled every six weeks under the chairmanship of Theodore Colton, Sc.D.

B. Directors

In Fiscal 1987, four (4) new Directors joined the Board: Tera Younger (MassPRO); Ralph A. Deterling, M.D. (Board of Registration in Medicine); Frederick W. Ackroyd, M.D. (At Large) and Ronald Sokol-Margolis (Mass. Hospital Association).

We wish to thank the following Directors who completed their service on the board: Robert Morris, D.S.W.; Shiela G. Baler, Ph.D., M.P.H.; William Ridder, M.D.; Francis D. Moore, M.D., Karin Dumbaugh, Sc.D. Gary Janko, and Suzanne Mercure.

C. Personnel

The Consortium staff now consists of five (5) full time, and five (5) part time staff/consultants.

We accepted the resignations of Barbara Skydell, Ph.D. (Senior Research Associate), and Deborah G. D'Arpa, M.B.A. (Senior Research Associate). Deborah Laufer, MPH completed her part time assignment to improve the Consortium's marketing materials.

D. Audited Account Statement

The firm of Creelman & Smith, P.C., Certified Public Accountants, completed an audit for the 1986/1987 fiscal year. The audit shows a positive excess of revenues over expenses for this year of \$2,419. This excess increases the previous positive fund balance. A complete audit is available upon request.

Revolving credit was established with the BayBank for cash flow.

E. Revenue and Expense Summary

Actual year end revenues were \$607,866, down from the previous year of \$621,000. Year end expenses were \$605,447, up from the previous year of \$558,939.

Membership fees remained the same since being set at \$6,000 per Board seat in 1978.

III. PROBLEM AREAS

Two of the state agencies indicated their intention to discontinue Consortium membership (Dept. of Public Health, Rate Setting Commission). They will be represented by the Executive Office of Human Services.

Several of the multi-year large grants terminated this year resulting in a decline in collaborative revenues. Conference expenses increased significantly.

Delays in acquiring Level III data and physician data from the Rate Setting Commission will inhibit new products.

IV. PRIORITIES

The Executive Director should focus his attention next year on an expansion of the Transition Fund campaign. In FY 1987, Mr. John Larkin Thompson, President of Blue Cross and Blue Shield of Massachusetts helped the Consortium with its second year of the fund raising drive. The second year was very successful, exceeding the goal for corporate contributions. The Transition Fund is providing the "seed" money to design new products, explore new areas for data collection and improve the timeliness of the annual data base. The three year goal is to raise \$225,000. Projects made possible through the generosity of the contributors were HealthMart '87, the Hospital Price Guide, several newsletters and matching funds for a study on the uninsured.

Other areas for priority attention include:

- A. Encourage new members to join the Consortium
- B. Develop Physician Reporting systems
- C. Improve publicity on Consortium activities
- D. Develop a study on the Mass. Health Care Economy with comparisons to national indicators
- E. Assist in the development of a Long Term Care Database
- F. Additional timely "Research Briefs" newsletters
- G. Raise funds for Pre-Doctoral fellowships in collaboration with local universities

Technical Review Committee
Annual Report FY 1987

The Technical Review Committee met six (6) times during the 1986 - 1987 year. It devoted a majority of its efforts to the discussion of study methods, refining hospital casemix and charge data statistics, and developing three new comparative reports. The Committee also established a methodology for the first employer guide to comparative charges for all Massachusetts hospitals. The Committee oversaw the development of the Consortium's first Research Plan, assisting the Consortium in setting its research and product development priorities.

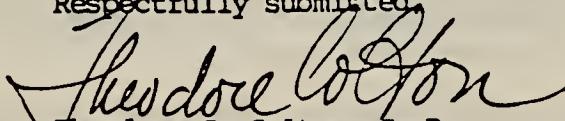
Independent Research

In the area of independent research, the TRC re-evaluated the Consortium's data collection policies and editing procedures as a result of the Consortium's shift to reliance on the state Rate Setting Commission for hospital discharge data. The TRC also had a principal role in the development of two new reports utilizing multi-year data. As a result of these initiatives the Consortium continues to provide member institutions with the most accurate, timely hospital discharge data available.

Collaborative Studies

The Committee worked closely with Consortium staff during FY 1987 and approved study methods for the Consortium's first comparative guide to hospital charges. The Consortium's guide is similar to others that have been popularized by other state business coalitions. One important difference is that the Consortium's Price Guide reports prices within specific case mix groups. This study is the product of two years of effort spent on developing a methodology and classifying procedures. Each hospital in Massachusetts reviewed its charge data before publication. The Hospital Price Guide is intended to serve as a tool for large group purchasers of health care and their employees.

Respectfully submitted,


Theodore S. Colton, Sc.D.
Chairman, Technical Review Committee

TREASURER'S REPORT

For the sixth consecutive year the Consortium ended the fiscal year (9/1/86-8/31/87) in the black. Revenues for the year were \$607,866 with corresponding expenses of \$605,447. Excess revenues over expenses were \$2,419.

It is also my pleasure to report that the Consortium continues to maintain a positive fund balance. The changes in income and expenses are depicted in the following chart. In summary, revenues in FY1987 declined slightly by \$13,134 due to the termination of several multi-year grants. Expenses increased however, by 8% between FY1986 and FY1987.

COMPARISON OF PERCENT OF REVENUE BY SOURCE

	1984	1985	1986	1987
Assessments	23%	18%	13%	14%
Independent Research	41%	23%	22%	32%
Collaborative Research	26%	52%	40%	25%
Conferences	10%	7%	15%	25%
Transition Fund	-	-	10%	14%

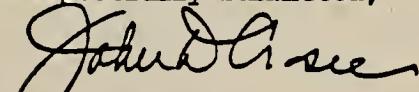
COMPARISON OF PERCENT OF EXPENSES BY ITEM

	1984	1985	1986	1987
Personnel	58%	56%	53%	57%
Computer	10%	15%	13%	11%
Other	32%	29%	34%	33%

The most striking and reassuring aspect of this year's report is the dramatic increase in sales demand for the Consortium's Baseline Reports up by more than \$56,000 and 42% over last year.

The Transition Fund which was undertaken last year as a fundraising drive among corporations and foundations was a large success and brought in a total of \$84,800, compared to \$59,500 last year. These funds will be used to help the Consortium implement its strategic plan for the timely analysis of new data for our existing members and expanding markets in the business community.

Respectfully submitted,



John Crosier
Treasurer

INDEPENDENT RESEARCH

Non-partisan and non-profit, the Consortium initiates projects which might not be undertaken by any one sector or agency and which may require a high degree of cooperative effort. The Board of Directors, representative of the major sectors of the health care community, determines the annual direction of this independent research. Results, in the form of published report series, constitute a "core package" of services distributed to Consortium members in return for their dues.

Since 1978, this annual research package has grown to include:

- The Hospital Data Base
- Hospital Utilization Report Series
- Diagnosis Related Group (DRG) Report Series

A Baseline Report catalog is available upon request which describes the Consortium's most popular reports:

Market Position
Market Trend Analysis
Patient Origin
Community Use Rates
Charges by DRG
Per Diem Charge Profiles
Hospital Case Mix Profiles
Payor Mix Trend Analysis
Hospital Price Guide

The Board of Directors has also authorized other independent research in the area of new data collection for ambulatory care, post-hospital (long term) care as well as projects to analyze multi-year trends in hospital utilization.

THE DATA BASE

<u>Acute Care General Hospitals Included</u>					
<u>Year</u>	<u>Mass.</u>	<u>Mass.</u>	<u>V.A.</u>	<u>Out of State</u>	<u>Total*</u>
				<u>Acute & V.A.</u>	<u>Hospitals</u>
1978	119		5	15	139
1980	115		5	20	140
1982	113		5	23	141
1983	109		-	-	109
1984	109		5	23	137
1985	109		5	24	138
1986	108		5	24	137

***Notes:**

(1980). Counts New York City and Albany County regions as 1 each; VA=6, RI=12
 (1982). Counts Connecticut, Maine, Albany County, New York City and Vermont area hospitals as 1 each; R.I.=13, VA=5
 (1983). Only MA Acute Care general hospitals; also 8 MA hospitals could not provide financial data.
 (1984). Counts Connecticut, Maine, Albany County, New York City, and Vermont area hospitals as 1 each; R.I.=13, VA=5; Five MA Hospitals could not provide financial data.
 (1985). Counts Connecticut, Maine, Albany County, New York City, New Hampshire and Vermont area hospitals as 1 each; R.I.=13, VA=5; One MA Hospital could not provide financial data.
 (1986). Counts Connecticut, Maine, Albany County, New York City, New Hampshire and Vermont area hospitals as 1 each; R.I.=13, VA=5; Two MA Hospitals could not provide financial data.

Patient and Clinical Data Set (for each inpatient discharge):

1. Patient I.D.	15. Disposition (Home Health, Nursing Home, death, etc.)
2. Hospital I.D.	16. Expected Payor
3. Admit Date	17. Admission Status
4. Discharge Date	18. Special Care Units
5. Length of Stay	19. Special Care Unit Days
6. Age	20. Diagnosis Related Group (DRG)
7. Sex	21. Major Diagnostic Category (MDC)
8. Race	22. Clinical Subspecialty
9. Zip Code of Residence	23. Total All Charges
10. Diagnoses (up to 5)	24. Total Routine Charges
11. Procedures (up to 3)	25. Total Special Care Charges
12. Procedure Dates	26. Total Ancillary Charges (up to 29 revenue centers)
13. Attending M.D. #	
14. Operating M.D. #	

Availability of data elements may vary by year (e.g. Race, Admission Status, Charges) Contact the Consortium Staff for details.

DATA EXPRESS permits the following selected data elements to be "dialed-up" and "down-loaded" to diskettes for a client's personal computer:

1. Hospital Name	8. Patient Residence (Town Code)
2. Diagnosis Related Group (DRG)	9. Sex
3. Clinical Subspecialty	10. Disposition
4. Major Diagnostic Category (MDC)	11. Total All Charges
5. Age	12. Total Routine Charges
6. Expected Payor	13. Total Special Care Charges
7. Days (Length of Stay)	14. Total Ancillary Charges

POOLING DATA

DATA SOURCES

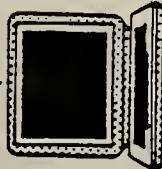
HOSPITAL

MEDICAL RECORD ROOM

DATA
VALIDATION



MASS. HOSPITALS



BORDER - STATE
HOSPITALS

17



STAFF
TECH. REVIEW COMM.
DESIGN
REPORTS



V. A. HOSPITALS

- PATIENT ORIGIN MIGRATION
- CASE MIX
- USE RATES
- MARKET SHARE
- HOSPITAL - SPECIFIC
- COMMUNITY - SPECIFIC
- PAYOR - SPECIFIC
- DIAGNOSIS / PROCEDURES
- DRG - SPECIFIC

MASSACHUSETTS HEALTH DATA CONSORTIUM INC.

INDEPENDENT RESEARCH

BASELINE REPORT SERIES

I. Patient Origin Report Set

1. "Distribution of Discharges by Number and Percent by Patient Residence" (by Hospital, Age and Service - 1978, 1980, 1982, 1983, 1984, 1985, 1986)
2. "Distribution of Discharges by Number and Percent by Hospital Destination" (by Town, Age and Service - 1978, 1980, 1982, 1984, 1985, 1986)
3. "Use Rates and Discharge Rates Per 1,000 Residents by Service, Age and Patient Residence" (Community-based small area analysis by HSA region and state only - 1978, 1980, 1982, 1984, 1985, 1986)
4. "Patient Migration by Service, Age, Residence, and Hospital Destination" (Summary Report and detailed analysis of in-migration, and out-migration by HSA and subarea regions - 1978, 1980, 1982, 1984, 1985, 1986)
5. "Distribution of Discharges, Discharge Days and Population by Locality, Age and Service" (by Town, Age and Service - 1980, 1982, 1983, 1984, 1985, 1986)

II. Market Position Report Set

1. "Market Share Analyses" (Hospital's market share by age, service and town for discharges and discharge days - 1978, 1980, 1982, 1983, 1984, 1985, 1986)
2. "Clinical Subspecialty Summary Report by Town, Age and Payor" (Town Summary Report of market share with discharges, and discharge days for 24 clinical subspecialties - 1980, 1982, 1983, 1984, 1985, 1986)
3. "Clinical Subspecialty Town Report by Hospital, Age, and Payor" (Town specific report of market share with discharges and discharge days of 24 clinical subspecialties by Hospital market share - 1980, 1982, 1983, 1984, 1985, 1986)

III. Market Position Trend Analysis

(Town summary of number and percent of discharges: Market share for 24 clinical specialties - FY 1983 through FY 1985; FY 1984 through FY 1986)

Hospital Utilization Report Series

ALL MASSACHUSETTS HOSPITALS

MDC/DRG	DRG DESCRIPTION	# OF DSCH	RANK	ALL CHARGES (\$)	RANK	Avg. ALL CHGS (\$)
391	NORMAL NEWBORNS	57596	1	32,278,019	27	560
373/M	VAG DELVRY W/O COMPLICATING DX	53770	2	81,705,967	5	1520
140/M	ANGINA PECTORIS	17681	3	50,169,411	13	2837
127/M	HEART FAILURE & SHOCK	17484	4	85,444,023	4	4887
371/S	CESAREAN SECTION W/O CC	16657	5	49,493,146	14	2971
430/M	PSYCHOSES	14754	6	95,707,873	1	6487
390	NEONATES W OTH SIG PROBLEMS	13683	7	9,830,438	104	718
243/M	MEDICAL BACK PROBLEMS	13602	8	33,563,719	24	2468
089/M	PNEUMONIA & PLEURISY >=70	13425	9	79,140,766	6	5895
182/M	ESOPH, GASTRO & DIGEST >=70	11397	10	35,712,975	21	3134
014/M	SPECI CEREBROVAS DISORD EX TIA	10813	11	77,482,713	7	7166
122/M	CIRC DIS W/AMI W/O COMP, ALIVE	8749	12	48,448,255	15	5538
296/M	NUTR & MISC METAB DIS >=70	8471	13	37,601,504	20	4439
143/M	CHEST PAIN	8412	14	17,314,264	60	2058
183/M	ESOPH, GASTRO & DIGEST 18-69	8171	15	16,320,375	64	1997
096/M	BRONCHITIS & ASTHMA AGE >= 70	7832	16	32,993,756	25	4213
138/M	ARRHYTHMIA & CONDCT DIS >=70	7760	17	28,429,515	31	3664
389	FULL TERM NEONATE W MAJ PROBLM	7150	18	13,584,965	77	1900
121/M	CIRC DIS W/AMI & CV CMP, ALIVE	6907	19	57,159,653	10	8276
209/S	MAJOR JOINT PROCEDURES	6810	20	95,335,807	2	13999
098/M	BRONCHITIS & ASTHMA AGE 0-17	6633	21	10,741,507	95	1619
294/M	DIABETES AGE >=36	6558	22	23,338,263	42	3559
355/S	NON-RAD HYSTERECTOMY <70	6487	23	28,468,194	29	4383
174/M	GI HEMORRHAGE >=70	6430	24	28,453,454	30	4425
088/M	CHRONIC OBST PULM DISEASE	6224	25	35,414,705	22	5591

TOP 25 DRGS 343-566 40.1% \$1.104 Billion

Source: DISTRIBUTION OF DISCHARGES, DISCHARGE DAYS, ALOS AND TOTAL CHARGES
BY DRG FY1986 DATA BASE UNTRIMMED

IV. Statewide Summary Charge Data

- "Distribution of Average Charges Massachusetts Hospitals by DRG" (Aggregate of all Massachusetts Hospitals: 5th through 95th percentile of average charges, median average charge, total discharges, number of hospitals treating this DRG and state average charge)
- "Distribution of Discharges, Discharge Days, Average Length of Stay, and Total Charges" (Untrimmed)

Table 1: Detailed Charge Report for 470 DRGs

Table 2: Top 100 DRGs in Massachusetts Ranked by Total Charges

Table 3: Top 100 DRGs in Massachusetts Ranked by Number of Discharges

(Also includes: Average of all Charges, Routine Charges, Special Care Charges, Ancillary Charges, Ancillaries as a Percent of All Charges and Percent of Cases under four days)

- "Distribution of Discharges, Discharge Days, Average Length of Stay, and Total Charges By HSA" (Untrimmed) (Tables 2 & 3)
- "Distribution of Discharges, Discharge Days, Average Length of Stay, and Total Charges by Teaching Status /Bed Size" (Untrimmed) (Tables 2 & 3)
- "Distribution of Discharges, Discharge Days, Average Length of Stay, and Total Charges by Patient Sex" (Untrimmed) (Tables 2 & 3)
- "Distribution of Discharges, Discharge Days, Average Length of Stay, and Total Charges by Insurance Carriers" (Untrimmed) (Tables 2 & 3)
- "Distribution of Discharges, Discharge Days, Average Length of Stay, and Total Charges by Selected Age Categories" (Untrimmed) (Tables 2 & 3)
- "Distribution of Discharges, Discharge Days, Average Length of Stay, and Total Charges by Discharge Status" (Untrimmed) (Tables 2 & 3)

— 1983, 1984, 1985, 1986

V. Hospital-Specific Charge Data

1. "Distribution of Discharges, Discharge Days, Average Length of Stay, and Total Charges by DRG" (any hospital in Mass.) Outliers Trimmed

Table 1: Detailed Charge Report by DRG (for each of 470 DRGs)

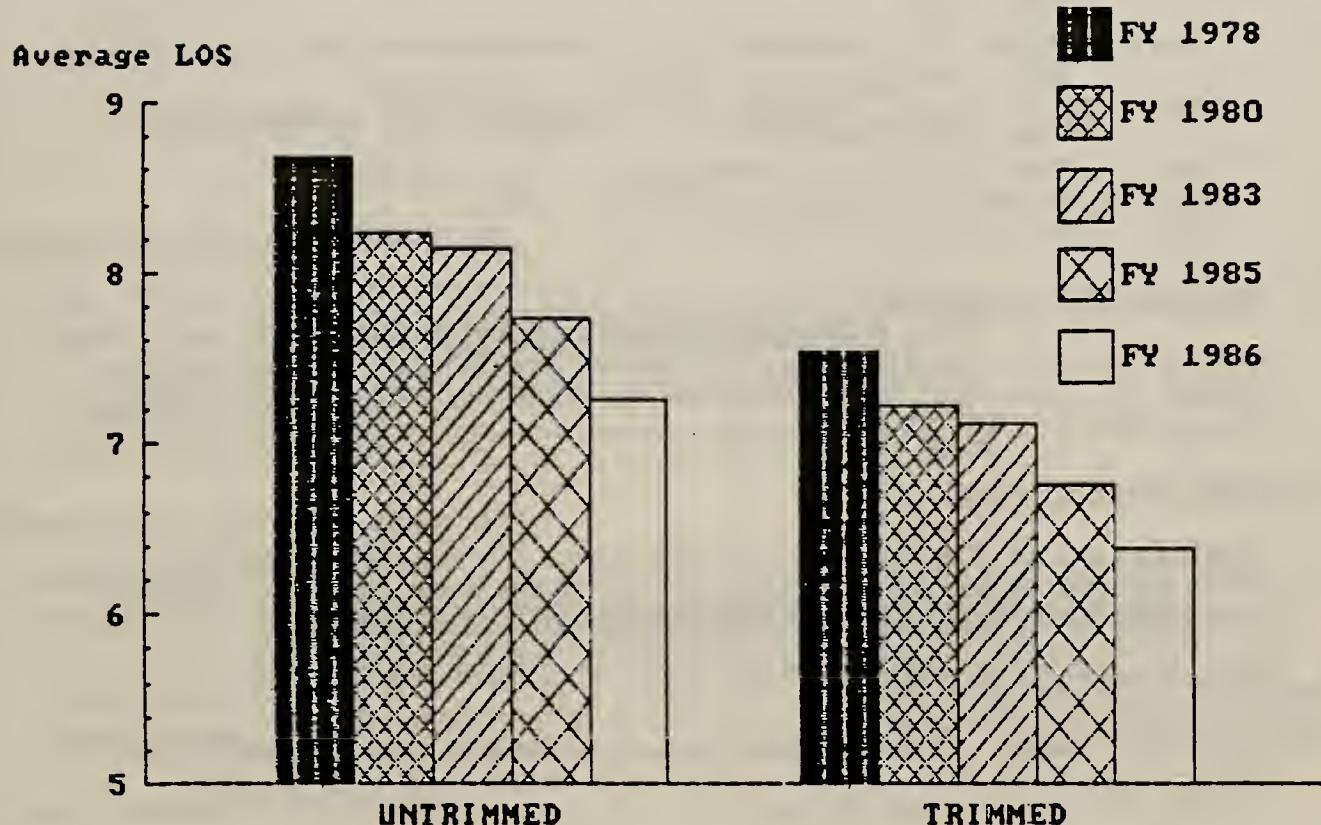
Table 2: Top 100 DRGs by Total Charges

Table 3: Top 100 DRGs by Number of Discharges

— 1983, 1984, 1985, 1986

Hospital Utilization Report Series

**Trends in Statewide Average Length of Stay
FY 1978 to FY 1986**



STATEWIDE AVERAGE LENGTH OF STAY
UNTRIMMED TRIMMED

YEAR	ALOS	ALOS
FY 1978	8.67	7.53
FY 1980	8.23	7.22
FY 1983	8.14	7.10
FY 1985	7.73	6.75
FY 1986	7.25	6.37

Source: Distribution of Discharges,
Discharge Days and Average LOS by DRG
Table 6a: All Massachusetts Hospitals

VI. Case Mix Profiles

1. "Report II: Comparative Analyses of Case Mix and Length of Stay and Age using DRGs" (Calculation of case complexity measure and length of stay performance index for eleven service categories)

Table 1: Each Hospital compared to Four Aggregate Groups (1978, 1980, 1982-1986)

Table 2: Each PSRO compared to All Massachusetts Hospitals (1978, 1980, 1982 only)

Table 3: Each HSA compared to All Massachusetts Hospitals (1978, 1980, 1982-1986)

Table 4: Each of nine Rate Setting Groups (1978, 1980 only)

Table 4: Teaching Status/Bed Size (1982 - 1986)

Table 5: Each of Ten Payors (1978 only)

VII. Per Diem Charge Profiles

(Payor Specific Distribution of Discharges, Discharge Days, Average Length of Stay and Total Charges by Hospital and 6 Major Service Categories) — 1985, 1986

VIII.**DRG Charge by Payor

"Distribution of Discharges, Discharge Days, Average Length of Stay and Total Charges by DRG by Payor" (any hospital in Mass. for Nine different Insurance Carrier categories) Outliers Trimmed — 1986

IX. Payor Mix Trend Analysis

(Hospital Summary of Number and Percent of Discharges, Discharge Days, Average Length of Stay and Total Charges by Payor - FY 1983 through FY 1985; FY 1984 through FY 1986)

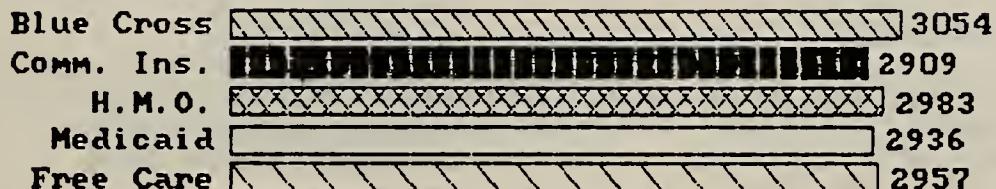
X. **Hospital Price Guide

(Comparative Prices for Twenty (20) selected Diagnosis and Procedures for every hospital in Mass. — 1985, 1986)

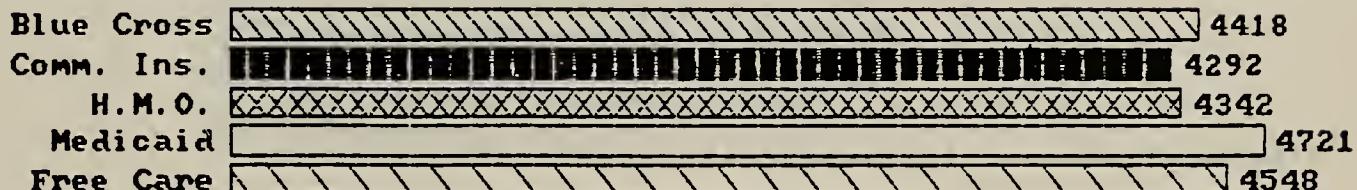
Diagnosis Related Group Report Series

Inpatient Charges by Payor Average of All Charges: 3 Common Surgical DRGs

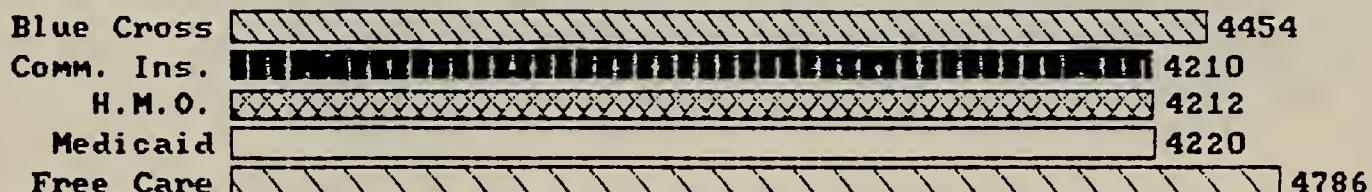
Caesarean Section (DRG 371)



Hysterectomy Age <70 (DRG 355)



Gall Bladder (DRG 198)



Source: Distribution of Discharges
Discharge Days, ALOS and Total Charges
by DRG; FY 1986 Data Base Untrimmed

XI. DRG Outlier and Mortality Report

"Report I: Distribution of Discharges, Discharge Days, and Average Length by DRG"

Section A: Detailed Report for 470 DRGs

Section B: Executive Summary

Section C: Top 100 DRGs ranked by Number of Discharges

Table 1: Each Hospital in Massachusetts	1978, 1980, 1982-1986
Table 2: PSRO Report	1978, 1980, 1982 -
Table 3: HSA Report	1978, 1980, 1982-1986
Table 4: Teaching Status/Bed Size Report	- - 1982-1986
Table 5: Payor Report	1978, 1980, 1982-1986
Table 6: Statewide Report	1978, 1980, 1982-1986

XII. Community Use Rate Report

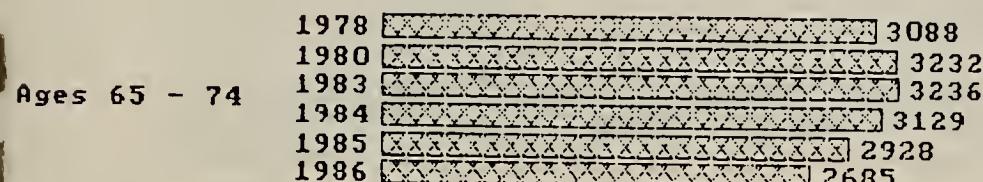
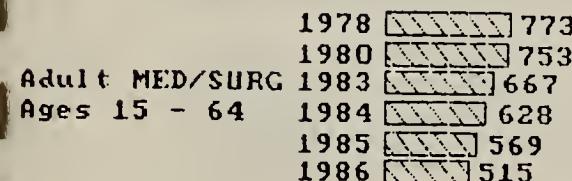
1. "Use Rates and Discharge Rates per 1000 Residents by Service, Age, and Patient Residence - Community Based Small Area Analyses" Discharge rates and use rates for every city in Massachusetts - 1978, 1980, 1982, 1983, 1984, 1985, 1986)

**New Report

Diagnosis Related Group Report Series

Statewide Trends in Hospital Utilization Massachusetts Residents' Use Rates 1978 to 1986

Inpatient Days/1000 Population



Source: Patient Origin Series
Community Use Rates '78, '80, '83, '84, '85, '86
(1980 Census)

COLLABORATIVE RESEARCH

The Consortium contracts with both members and non-members to execute customized data studies. Experienced in the management and integration of diverse data elements, Consortium technical staff provides data management consulting services on study design, final output formats, systems design and programming.

Special studies are usually initiated by outside agencies and the data collected are the property of the agency funding the study. The Consortium always encourages its collaborators to pool new data for the benefit of all the members. Occasionally the Consortium itself will seek out appropriate collaborators for a project that appears to have implications for all members or represents an innovative approach to the presentation and analyses of health data. Examples of research questions for which the Consortium has designed studies include:

- DOES PROSPECTIVE REIMBURSEMENT ON A POPULATION BASIS CREATE INCENTIVES FOR COST-EFFECTIVE CARE? (A Capitation Study with Blue Cross of Massachusetts for 61 communities)
- ARE THERE GEOGRAPHIC AREAS IN MASSACHUSETTS WHERE THERE IS A HIGHER THAN AVERAGE UTILIZATION OF INPATIENT ORAL SURGERY? (A Hospital-Specific Study with the Department of Public Health, Division of Dental Health)
- WHAT ARE THE CHARACTERISTICS OF PATIENTS WHO LEAVE THEIR AREA OF SOUTHEASTERN MASSACHUSETTS FOR HOSPITALIZATION? (A Marketing Study with 16 Hospitals of the Southeastern Massachusetts Hospital Council)
- ARE THERE VARIATIONS AMONG SMALL GEOGRAPHIC AREAS IN MASSACHUSETTS IN THE RATE OF INPATIENT SURGERY FOR THE MOST COMMON SURGICAL PROCEDURES? (A Population-Based Small Area Analysis with the Health Planning Council for Greater Boston)
- WERE REGIONAL VARIATIONS IN SPONTANEOUS ABORTION DUE TO A COMMUNITY'S GEOGRAPHIC PROXIMITY TO KNOWN TOXIC DUMP SITES? (An Epidemiological Study with Sidney Farber Cancer Institute and Harvard Medical School)
- CAN NURSING DEPARTMENT BUDGETS BE PREDICTED BASED ON CASE MIX VOLUME AND PATIENT ACUITY DATA? (A Study with the Massachusetts Eye and Ear Infirmary and Five Pilot Hospitals)
- COULD CARDIAC CATHETERIZATIONS BE PERFORMED IN AN OUTPATIENT SETTING SAFELY AND COST-EFFECTIVELY? (An evaluation study with the Massachusetts General Hospital)
- WHAT PERCENTAGE OF LICENSED, ACTIVELY PRACTICING PHYSICIANS PARTICIPATE IN THE MASSACHUSETTS MEDICAID PROGRAM (A special project with the Massachusetts Medical Society)
- IS IT POSSIBLE TO EXPLAIN THE COMMUNITY VARIATIONS IN SURGICAL RATES BY EXAMINING THE TREATMENT OPTIONS AND PRACTICE PROFILES BY HOSPITAL? (A study on coronary heart disease with Dr. Francis D. Moore and Dr. James Dalen)

Research-To-Date

- MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

Statewide Childhood Injury Prevention Project: Hospital-based and population-based incidence of childhood injury in selected cities in Massachusetts to target appropriate populations for a health education project and assess project results.

Division of Dental Health: Distribution and frequency of dental surgery in Massachusetts hospitals.

Division of Emergency Medical Service: Regional distribution of trauma cases to fulfill federal reporting requirements.

Division of Research and Statistics: Implementation of statewide computerized Bed Need Formula.

- EXECUTIVE OFFICE OF HUMAN SERVICES

Office of State Health Planning: Development and implementation of a case mix adjustment factor for each Massachusetts hospital for application in the Bed Need Formula which is used as part of the Determination of Need process. Third generation of the case mix adjustment which is currently being used includes age and service specific data.

Office of Health Policy: Analyses of inpatient hospitalization discharge rates and use rates for specific rehabilitative diseases by long term care planning areas. Frequency distributions of acute care inpatient surgical procedures which potentially could be shifted to an ambulatory setting.

- BOARD OF REGISTRATION IN MEDICINE

Create Licensure Data Base on personal computers to facilitate credentialling system.

- BLUE CROSS OF MASSACHUSETTS

Health Maintenance Organization Office: Baseline data to educate hospitals and physicians on utilization rates as part of the development of an experimental hospital capitation project.

Office of Health Care Planning and Program Evaluation: Comparative analyses of case complexity and length of stay including a calculation of excess bed days by payor and service for two fiscal years.

Patient migration analyses by service, age, residence and hospital destination.

Office of Government Programs: Technical assistance to hospitals in the merger of discharge and billing data and development of the required systems design and software to accept and manage the integrated data. This Integrated Data Demonstration (IDD) project included collaboration with the Massachusetts Rate Setting Commission and was funded through a grant from the Health Care Financing Administration, HHS.

- HEALTH SYSTEMS AGENCIES

Pediatric Appropriateness Review: Standard and baseline utilization data for pediatric hospital services in the Boston area for the Health Planning Council for Greater Boston.

Most Frequent Surgical Procedures: This year long study with the Health Planning Council for Greater Boston focused on per capita utilization of twenty-two surgical procedures for the state of Massachusetts. The purpose of the analysis was to identify significant variations in both a statistical and practical sense among the rates of the twenty-two chosen procedures. An analysis has been conducted beginning with FY1980 hospital utilization data.

- ** A follow-up of the small area surgery study to examine variations by small area for 117 surgical and medical groups of Diagnosis Related Groups (DRG).

Disease Prevention Study: A presentation of population-based rates of preventable and manageable diseases (based on work by Dr. David Rutstein) in selected communities in Massachusetts for the Health Planning Council for Greater Boston. These data will be used in an analyses of the "costs of preventable diseases."

Geriatric Study: An expansion of the methodology which was used to prepare the DRG Small Area Variation Study. The objective is to apply the same methodology to DRGs into which geriatric patients primarily fall.

- MASSACHUSETTS HOSPITAL ASSOCIATION

Department of Policy Analysis: Hospital-specific reports for Medicare patients comparing Diagnosis Related Group (DRG) based case mix factors in preparation for changes in the Medicare reimbursement regulations. Various weighing schemes were tested and compared for this geriatric case mix study.

- MASSACHUSETTS MEDICAL SOCIETY

Physician Identification Information: Creation of an anonymous unique physician identifier by matching hospital-specific physician identifiers with the Board of Registration in Medicine number. Done in collaboration with the Massachusetts Rate Setting Commission to fulfill the requirements of regulation 114.1 CMR 17.00 and for use with the merged case mix and billing data.

- ** Medicaid Access Project: Creation of a data base that merges files from the Board of Registration in Medicine, Folio Associates, Massachusetts Medical Society, and the DPW Medicaid Providers. Tables were published by geographic area and physician specialty which display the percentage of actively practicing physicians who participate in the medicaid program.

- PEER REVIEW ORGANIZATIONS (PRO)

Ear, Nose and Throat Procedures (ENT): Regional and hospital-specific norms and frequency distributions of ENT procedures.

- ** Studies undertaken or completed in this fiscal year.

Emergency Medical Services: Regional data on trauma, both population-based and hospital-specific, for use in federal reporting.

Diagnosis Related Group Payor Study: Hospital-specific DRG reports for Blue Cross and Commercial Insurance patients describing number and percent of discharges, discharge days, average length of stay and excess bed days as well as a comparison of case mix indices by payor and Major Diagnostic Category (MDC). This series of reports was developed for use the development of a utilization review program.

- HEALTH INSURANCE ASSOCIATION OF AMERICA

New England Life Insurance Company: Analyses and processing of claims data for use in comparative reports.

- HEALTH MAINTENANCE ORGANIZATIONS (HMO)

Multi-Group Health Plan: Patient origin Tapes.

Family Health Plan of Massachusetts: Detailed hospital-specific DRG data for selected payor categories by hospital. These reports were used to develop arrangements with local hospitals.

- NURSING HOMES

Federation of Nursing Homes: DRG by disposition study to look at patients discharged to nursing homes, SNF's, ICF's and Home Health Service.

- PARTICIPATING HOSPITALS

New England Medical Center: Data to assist in the evaluation of the need for a regional pediatric trauma center.

Massachusetts Eye and Ear Infirmary: Collection and analysis of data on nursing resources from five pilot hospitals to develop a nursing acuity index by diagnosis (under a grant from the Blue Cross/Massachusetts Hospital Association Innovation Fund).

Metropolitan Boston Hospital Council: Detailed analyses of each of the 17 Boston hospital's market share of Medicaid patients by age, zip code of residence, and Diagnosis Related Group to assist in the evaluation of a proposed managed Medicaid system in Boston.

(Participating Hospitals. Continued)

Southeastern Massachusetts Hospital Council: Regional migration and market share patterns to analyze individual hospitals' market shares and regional migration patterns. This multiphased project included analyses by individual Diagnosis Related Group, clinical subspecialties, age and payor. Data were presented both in tabular format as well as graphically for the 16 hospitals.

Framingham Union Hospital: Population-based data on cardiac diagnosis to better understand the frequency of cardiac disorders in the hospital's service area.

- ** Studies undertaken or completed in this fiscal year.
- ** Massachusetts General Hospital: A study to evaluate the efficiency, safety and cost-effectiveness of outpatient cardiac catheterization (under a grant from the Blue Cross/MHA Fund for Cooperative Innovation).

Beverly Hospital: Development of a micro computer based program for nurse staffing.

- OTHER MASSACHUSETTS ORGANIZATIONS

- ** Boston University, School of Management: A study to develop and evaluate an alternative method for pricing DRGs that makes some DRGs economically attractive to hospitals. The project used information from the Rate Setting Commission's 403 cost reports and the Consortium's statewide hospital case mix and financial data base to develop cost to charge ratios by cost center and DRG as an estimate of average cost.

Harvard Medical School: Calculation of the rate of spontaneous abortions in areas where there are toxic waste sites to investigate possible effects of toxic waste disposal.

Harvard School of Public Health: The frequency distribution by hospital of renal cancer to determine hospitals for inclusion in further case study analyses.

Poison Control Center: Data on the frequency of cases of poisonings that were hospitalized to assist in evaluation of the use of the Poison Control Center at Children's Hospital Medical Center.

Sidney Farber Cancer Institute: Analysis of discharge data which had been linked to regional cancer registry data to investigate treatment patterns of women with breast cancer.

Charles River Hospital: Data from a private psychiatric hospital combined with data on psychiatric patients in acute care hospitals for a needs assessment evaluation.

(Other Massachusetts Organizations, Continued)

** Dr. Francis D. Moore: The development of Treatment Option Profiles for hospitals to begin to understand the range of treatment patterns among hospitals and to study variations uncovered through small area analyses. The preliminary work is being done with Dr. James Dalen at UMASS Medical Center, in the area of coronary heart disease. (With grants from Robert Wood Johnson Foundation, Jessie B. Cox Charitable Trust, Walnut Trust)

East Boston Neighborhood Health Center - Senior Health Project

A community based longitudinal study of the health and social need of persons 65 years of age and older from East Boston, a neighborhood of Boston. One of the goals of the project is to provide information by which decisions on elderly programs can be made and to further the understanding of the needs and effects of these programs on the elderly. The study will attempt to more intensively study the very frail elderly, aged 80 and over, as to their needs and to track their hospitalization experience.

** Studies undertaken or completed in this fiscal year

Boston University School of Medicine, School of Public Health Medicine, Drug Epidemiology Unit - data on selected ulcers, blood disorders and cancers.

CIGNA Corporation:

Project 1: Development of a guide to hospital utilization in Massachusetts for use by Benefit Managers, coalition members and consumers. The guide, currently referred to as "Health Care Tabs", is being compiled from over 60 existing Consortium reports for each of three years of data. This was one of eleven national coalition projects funded under CIGNA's Coalition Grant Program.

Project 2: Price Guide for Common Surgical Procedures by Hospital.

Project 3: Ambulatory Data Base, Feasibility Study.

** Millipore Corporation - Design survey for 3,000 corporate employees on attitudes toward benefit design, cost containment and health promotion.

● LEGISLATURE

** Mass. Senate Post Audit Committee - Frequency of AIDS cases by hospitals, community, age and payor. Displaying discharges, days and total charges.

** U.S. Senate Finance Committee - Description of High Cost (>\$30,000) cases for infants under 1 year of age. Displaying discharges, total charges and average charges by payor for residents of Massachusetts and selected border states.

• OUT-OF-STATE ORGANIZATIONS

Day Kimball Hospital - Putnam, Connecticut: Clinical subspecialty information on Connecticut residents from specified zip codes who were treated in Massachusetts hospitals.

Northeastern New York Hospital Association - Albany, N.Y.: Case mix information on New York residents from a specified zip code range who were treated in Massachusetts hospitals.

Presbyterian-University Hospital of Pittsburgh, Pittsburgh, Pennsylvania: Case mix information on Pittsburgh residents who were treated in Massachusetts hospitals.

Johnson Memorial Hospital, Stafford Springs, Connecticut: Analyses of Connecticut residents who had received one-day surgery in a Massachusetts

** National Center for Health Services Research, Rockville, Maryland: Statewide discharges for inclusion in National Hospital Care Utilization Project.

National Center for Health Statistics, Hyattsville, Maryland: Age-specific discharge and use rates for one surgical procedure: lens extraction.

** Women and Infants Hospital of Rhode Island, Providence, Rhode Island: Project #1: Case mix and market share information on neonatal cases treated at 10 Massachusetts hospitals.
Project #2: Data Merger services for 60 hospitals' tapes in a study to evaluate the impact of DRG reimbursement on perinatal centers nationwide

Exeter Hospital (N.H.) - Patient Origin Tapes

COMPARE: An acronym for the Consortium of Model Programs in Aging Research Evaluation, was organized in response to the dearth of comparative information about community services to the elderly. This lack of information has handicapped those wanting to expand or develop services in a cost-effective manner and has limited the generalizability of findings generated by research conducted at a single site. COMPARE contracted with the Massachusetts Health Data Consortium to conduct a feasibility study to determine whether COMPARE is a viable concept and worthy of ongoing support. The feasibility study was conducted with the support of the Retirement Research Foundation in Chicago.

The founding COMPARE members were: The Benjamin Rose Institute, Ohio; On Lok Senior Health Services, California; The City of New York Department for the Aging, New York; The Amherst H. Wilder Foundation, Minnesota; and Community Care Organization of Milwaukee County, Wisconsin.

** Impac Consulting: Diskettes with Massachusetts and out-of-state zip codes discharged from specific hospitals with selected procedures and clinical subspecialties to perform market share analysis.

** Lewin & Associates: Data tape for four years of data (FY82-FY85) for discharges with diagnoses for selected hospitals in Massachusetts.

Upjohn Company, Kalamazoo, Michigan: Trended data on the frequency of cases of postpartum hemorrhage that were hospitalized in Massachusetts for a post marketing drug study.

Out-of-State Sources for Inpatient Data:

Office of Health Service Planning & Review, New Hampshire

CHIME Program, Connecticut Health Information Management and Exchange

SEARCH, Rhode Island Health Services Research, Inc.

SPARCS, State of New York Department of Health, Office of Health Systems Management

Maine Division of Research and Data Management

Vermont Division of Public Health Statistics

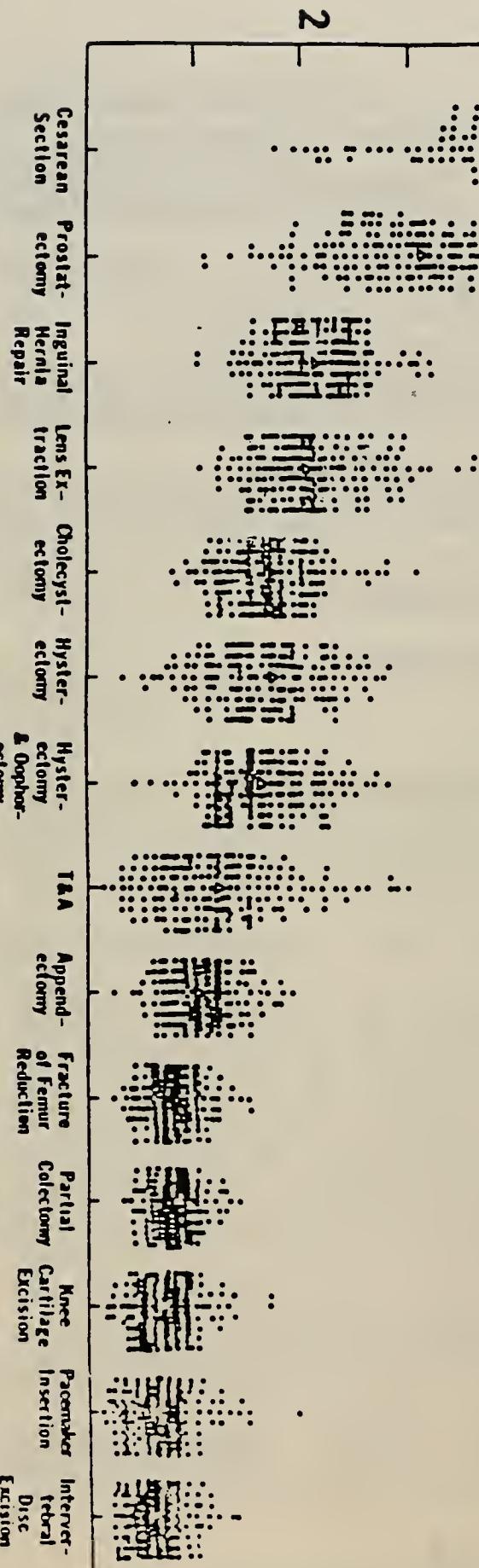
** Studies undertaken or completed in this fiscal year.

RATE PER 1,000 POPULATION

2 4 6 8

"VARIATIONS IN SURGICAL UTILIZATION IN MASSACHUSETTS COMMUNITIES"

△ = State Rate

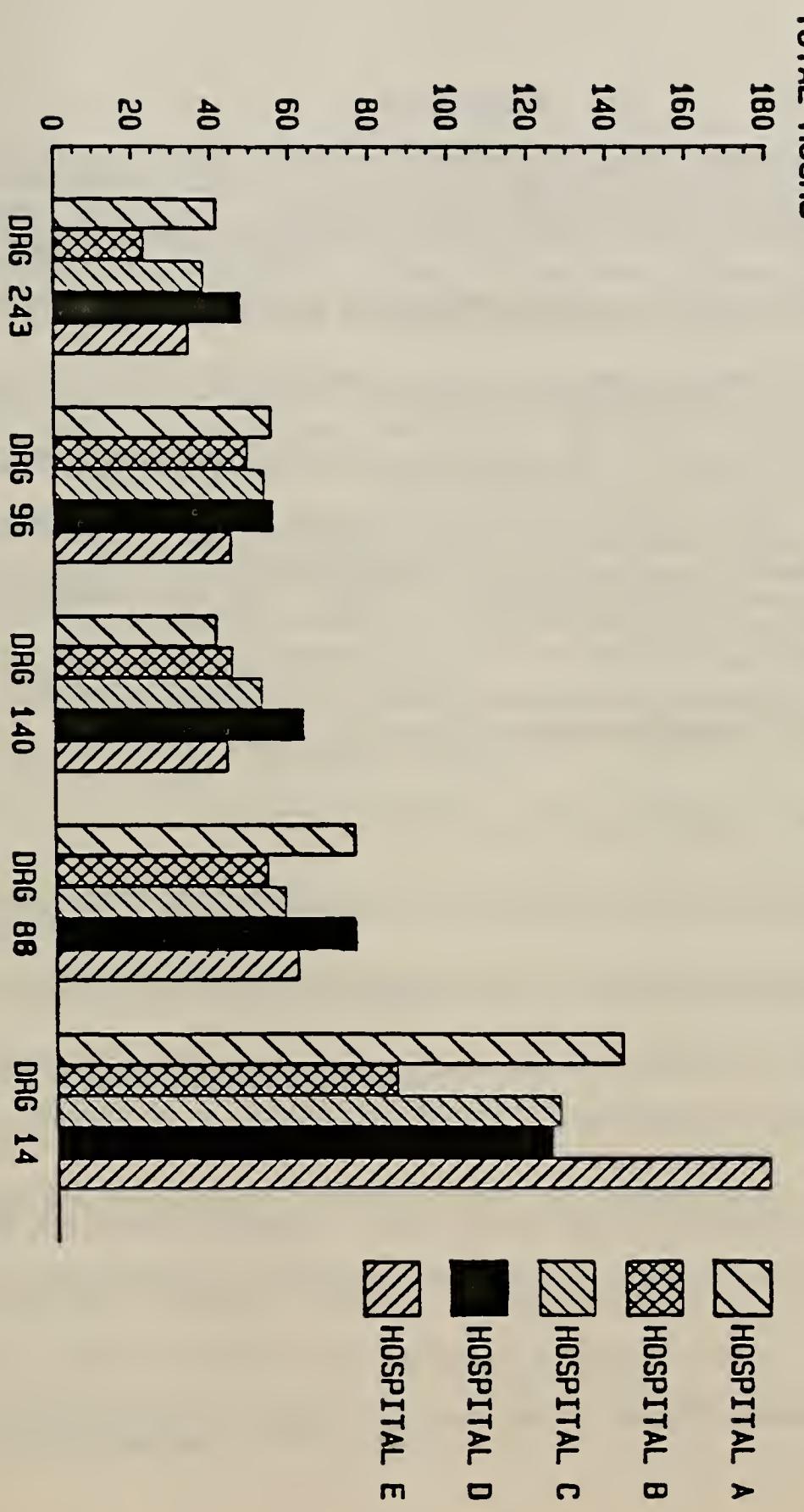


NO. OPERATIONS 13,463 8,557 12,244 11,962 9,975 5,186 5,018 7,213 6,229 4,696 4,688 4,061 3,908 3,557

¹Age-adjusted surgical rates in 172 geographic subgroups (1980 Massachusetts Data).

2Data tables prepared for the Health Planning Council for Greater Boston by the Massachusetts Health Data Consortium, Inc.

**TOTAL AVERAGE NURSING HOURS PER DISCHARGE
BY DRG AND HOSPITAL
ALL AGES**



10/1/83 - 6/30/84
PREPARED FOR THE MA. EYE & EAR INFIRMARY BY:
MA. HEALTH DATA CONSORTIUM, INC.

EDUCATION

The Consortium performs a unique educational function in the state through its sponsorship of conferences and workshops featuring prominent local and national figures speaking on new data uses and methodologies. The Annual Meeting, organized around a major current theme in the Massachusetts health care community, traditionally draws over 200 people. Individual Consortium staff members are often invited to make presentations to both local and national groups as well as to speak at Consortium sponsored functions.

The Consortium received a grant from the Permanent Charities Fund to develop educational and training materials for hospital personnel in the uses of DRG data. The Consortium staff has also designed and produced an instructional implementation manual to help hospitals establish procedures for the integration of their billing and discharge data.

The Consortium sponsors relevant educational functions and publications for the health care community on such topics as integrated data, computer literacy for health professionals, and applications of DRG data. The Consortium will also continue to seek out other opportunities to enhance knowledge of health data applications.

A list of past conferences and workshops sponsored by the Consortium follows as well as a list of organizational presentations.

CONFERENCES

An Update on Managed Care - Tenth Annual Meeting, December 8, 1987

MedCom '87: Fifth Computer Exposition for Physicians and Other Health Care Professionals - November 21 & 22, 1987

Second Annual Hospital Computer Applications Exhibition on Cost Accounting- September 28, 1987

HealthMart '87: First Annual Corporate Health Care Exposition - September 15 & 16, 1987

First Annual Technical Seminar on Competitor Analysis - June 23, 1987

Risk Management and Quality Assurance Programs - March 2 & 3, 1987

The New Imperative for Effective Health Quality Measurement - Ninth Annual Meeting, December 2, 1986

MedCom '86: Fourth Annual Computer Exposition for Physicians and Other Health Care Professionals - November 15 & 16, 1986

Monitoring the Effects: Environmental and Occupational Health, Establishing Massachusetts Priorities - September 11, 1986

The Hospital Computer Applications Exhibition on Cost Accounting - September 4, 1986

Third Annual Computer Exposition for Physicians and Other Health Care Professionals - June 7 & 8, 1986

Negotiating Financial Relationships between Medical Staffs and Hospitals - Eighth Annual Meeting, December 3, 1985

Integrating Nursing into the Hospital Revenue Stream - October 23, 1985

Hospital Charges in a Competitive Market: Strategies for Providers and Purchasers - May 29, 1985

The Uneasy Alliance: Uses of Information and the Changing Role of Trustees, Physicians and Hospital Managers - Seventh Annual Meeting, December 11, 1984

Computer Applications in Nursing (Conference Management for the Boston University School of Nursing), September 19 & 20, 1984

New Issues in Long Term Care Create New Demands for Data - October 30, 1984

Winners and Losers: Strategies for Integration of Case Mix Management with Hospital Cost Accounting - June 1, 1984

Investor-Owned Surgical Centers and Hospitals: Guidelines for Monitoring and Outcome Evaluation - Sixth Annual Meeting, December 6, 1983

Case Mix: A Strategic Management Tool...How and Why to Use It - February 15, 1983, March 15, 1983, May 11, 1983 and June 2, 1983

Merging Hospital Case Mix & Charge Data: A Progress Report/Workshop - September 16, 1983

Introduction to Micro Computers:

- For Hospital Managers - December 16, 1982, January 25, 1983
- For Physicians - May 25, June 1, June 3, 1983; May 2, June 20, 1984

Three Views on Using Health Policy Information to Manage in Times of Crisis - Fifth Annual Meeting, December 2, 1982

ICD-9-CM DRGs: A Whole New Ballgame - June 29, 1982

Will Your Hospital Be Ready for the Fiscal 1983 Rate Setting Regulations?: Two Seminars to Help Massachusetts Executives Comply with the Case Mix and Charge Data Regulations - May, 1982

New Reimbursement Incentives - New Demands for Data - Fourth Annual Meeting, December 1, 1981

A Conference on the Massachusetts Health Care System: Its Costs and What Corporate Executives Need to Know (In collaboration with Department of Community Health, Tufts University School of Medicine), October 27, 1981

A Workshop on the Uses of the Consortium's DRG Report Series (In collaboration with School of Public Health, University of Massachusetts), September 9 & 10, 1981

A New Case Mix Technique: A Seminar - June 24, 1981

A Conference on Case Mix Reimbursement (In collaboration with the University Health Policy Consortium, Brandeis, B.U., & M.I.T.), January 13, 1981

What are the Appropriate Roles of the Public and Private Sectors in Health Data Collection? - Third Annual Meeting, December 17, 1980

Dialogue with Members: Consolidation and Sharing of Data - Second Annual Meeting, December 13, 1979

Health Statistics Today and Tomorrow - First Annual Meeting, December 13, 1978

PRESENTATIONS, PAPERS AND PUBLICATIONS BY CONSORTIUM STAFF

- Densen, P.M., Fielding, J.E., Getson, J. and Stone, E.M.: "The Collection of data on hospital patients - the Massachusetts Health Data Consortium approach." New England Journal of Medicine 302(3): 171-173, 1980
- "A Statewide Patient Origin Study - A Necessity to Institution - Specific and Population-Based Planning." Elliot Stone. Proceedings of the 18th National Meeting of the Public Health Conference on Records and Statistics. August, 1980
- Stone, E.M., Comstock, C.B., and Malbon, A.J.: "A Statewide Patient Origin Study to Identify Variations in Hospital Utilization." Massachusetts Journal of Community Health, Volume 1, Number 2, Spring, 1981
- Book Review: New England Journal of Medicine, July 23, 1981, Elliot Stone "Hospital Costs and Health Insurance" by Martin Feldstein
- "Can Hospital Information Systems be Regulated - the Massachusetts Experience." Elliot Stone, Proceedings of the Fifth Annual Symposium on Computer Applications in Medical Care, November, 1981
- "Integrated Medical Record and Financial Data in Hospitals — A Decision Support System for Competition and Cost Containment." Elliot Stone, Proceedings of the Sixth Annual Symposium on Computer Applications in Medical Care, November, 1982
- "Implementing a Microcomputer-Based Acuity Information System: Removing the Paper Mountain." Elliot Stone with C. McPherson, R.N.; S.F. Coady; R.C. Hardin, Ph.D., Proceedings of the Seventh Annual Symposium on Computer Applications in Medical Care, March, 1983
- "Merging Case Mix (DRG) and Billing Data — The Massachusetts Experience", American Medical Record Association, Annual Meeting, Boston, October 5, 1983
- "Hospital Case Mix and Nursing Care Costs: Developing an Integrated Data Base for Managing Nursing Resources." Barbara Skydell, R.N., Ph.D.; and Elliot M. Stone, Proceedings of the Eighth Annual Symposium on Computer Applications in Medical Care, November, 1984
- Consortium Reports are cited in: "Strategic Analysis for Hospital Management," ASPEN, Roger Kropf, 1984
- "Unit Cost of Routine Inpatient Services." Barbara Skydell, R.N., Ph.D., with M. Arndt, D. Watson, E. Anderson, Proceedings of the Fifth Annual GRASP Users Conference, November, 1984
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- "Inpatient Nursing Services: Productivity and Cost," Barbara Skydell, R.N., Ph.D., and Margarete Arndt, Chapter 10 in the National League for Nursing's publication: Costing Out Nursing: Pricing Our Product, 1985, New York
- "The Politics of DRGs in Massachusetts", Elliot M. Stone, with John Lind (MHA); Karen Quigley (Blue Cross); Mass. Nurses Association, April 3, 1986
- "Using Hospital Case Mix Data Bases to Manage Nursing Services", with Barbara Skydell, Ph.D., Proceedings of the Fifth Conference on Medical Informatics, Washington, DC, October, 1986
- "Managers Can Take on New Responsibilities as Data Brokers, Information Coordinators." Deborah Laufer and Elliot M. Stone, Medical Records Briefings, Vol.1, No. 3, December, 1986
- "The Politics of Collecting and Disseminating Regional Hospital Statistics in the USA", Proceedings of the Fourth Symposium on Health and Economy, Antwerp, Belgium, April, 1987
- "Micro to Mainframe", Elliot M. Stone and Deborah D'Arpa; A Technical Seminar Presented by the National Association of Health Data Organizations (NAHDO); April 29, 1987, Boston
- "Collaborating with State Health Data Systems", Elliot M. Stone and Marlene Larke (NAHDO) at the Association for Health Services Research - 4th Annual Meeting, June 15, 1987, Chicago
- "Strategies to Conduct a Competitor Analysis", Debra Lerner, MaryAnne Patella, Elliot M. Stone; New England Hospital Assembly, November 4, 1987, Boston
- "Why External Agencies Want Your Clients' Reports — An Update on Ambulatory Data Systems", Elliot M. Stone, IDX Corporation, December 10, 1987, Boston
- "I Need the Data Yesterday — A New Role for Records Managers as an Information Broker", The Healthcare Information Systems Sharing Group, January 28, 1988, Miami Beach, Florida
- "The Politics of Collecting and Analyzing Hospital Statistics", Health Policy and Management Faculty, Harvard University, February 24, 1988, Cambridge

DATA POLICIES AND PROCEDURES

Requests Involving the Technical Review Committee (TRC)

A data sharing contract between the hospitals and the Consortium regulates the procedures of data collection and release. Protocols have been established for access to the data. The Consortium must honor the terms of its agreement with each hospital by providing data in the following way:

1. The data request may be made by the Executive Director, by the Board of Directors, the staff, a member organization, or an individual.
2. The Consortium staff will review each study to insure that it is technically feasible and appropriate for implementation by the Consortium.
3. When specific providers are to be named in a report, the TRC reviews the study methods and any provider comments received the Consortium on the study.
4. Reports may be transmitted on any medium of the requestor's choice (tape or hard copy).

For Studies that Name Hospitals

1. Staff determines the availability and confidentiality of the data, the time required for the study and its approximate costs.
2. The Consortium staff prepares a preliminary study methodology with proposed caveats/limitations and distributes that to the TRC. Each data provider is sent a description of the study and asked to comment prior to the next TRC meeting.
3. At its regular meeting, the TRC discusses study methodology and any provider comments received by the Consortium. If measures to protect patient confidentiality are needed, steps to be taken in formatting the reports are defined by the staff and the TRC. The Committee then makes a formal recommendation on the study. The TRC's recommendation is then forwarded to the Executive Committee or the Board of Directors.
4. Study methodology is finalized and sent to the requestor for approval.
5. Computer programming is implemented to tabulate and format the data. Routine quality control measures are applied.
6. The Consortium works with the requestor to explain the general caveats and findings of the study.

7. The report is released to the requestor.

The Consortium staff works with all users to expedite the process of the TRC, especially in the area of hospital notification and comment. Requests from members must be honored. To date, all reports have been published within the needed time frame of each requestor.

Requests for Already Published Reports

Requests for reports already published by the Consortium may be filled without review by the TRC.

Independent Contracts Outside the TRC

In addition to "core products" for members and special collaborative studies for requestors which involve hospital data collection and analysis, the Consortium can contract to perform selected data collection and data processing for other groups in the health care field.

Data provided to the Consortium from organizations other than hospitals are not necessarily bound by the protocols established for the hospital discharge data. Instead, the contracting organization and the Consortium can negotiate agreements regarding access and review which are both mutually agreeable and specific to each project.

HISTORICAL HIGHLIGHTS

1976/1977

- Contract from the National Center for Health Statistics (NCHS) to the Department of Public Health (DPH) to study the feasibility of designing and developing a system to collect the Uniform Hospital Discharge Data Set (UHDDS).

Jonathan Fielding, Commissioner

Paul Densen, Chairman of the Advisory Committee

Jake Getson, Director, Office of State Health Planning

Louis Freedman, Principal Investigator

Saul Franklin, Project Director

- DPH Convenes Hospital Data Advisory Committee (March 22, 1976)
- Hospital Discharge Data Study's Advisory Committee convenes working committees:
 - The Technical Committee
 - The Utilization Committee
 - Finances
 - Board Structure
 - By Laws
- Dorothy Rice, Director of NCHS and Michael Goran, Director of Bureau of Health Care Quality (PSRO program) attend 4th meeting of Advisory Committee (June 7, 1976)
- Advisory Committee recommends formation of an independent Corporation with 21 Board seats to balance power among member agencies.

1978

- Consortium incorporated (February 3, 1978).
- First meeting of the original Members and the Initial Board of Directors (April 28, 1978); Dorothy Rice, keynote speaker. Paul Densen, elected President of the Board; Elliot Stone, appointed Executive Director
- Original founding members - 16 agencies
- Governor Dukakis signs Chapter 186 enabling the Department of Public Health, Department of Public Welfare and the Rate Setting Commission to join Consortium (May 11, 1978)
- Technical Committee issues Final Report (May, 1978)
- Utilization Committee issues Final Report (May, 1978)
- Consortium offices move from temporary offices at Harvard to Waltham, Mass. (July, 1978)
- Subcontract from Department of Public Health to Consortium to complete NCHS implementation study

SEPT 1978 - AUG 1979

- Consortium membership increased to 19 as state agencies join
- First full fiscal year of operation
- NCHS contract to deliver statewide data
- Board authorizes first "core package" for members: the Patient Origin Study with 1978 data.
- Technical Review Committee formed
- Long Range Work Program Committee addresses funding issues in report: "Strategy for Development"
- 120 hospitals sign the voluntary data sharing agreement

SEPT 1979 - AUG 1980

- Data base software developed; application software designed
- Contract renewed with NCHS to deliver statewide data
- Products marketed — over 40 requests received
- Proposal sent to HCFA with Rate Setting Commission and Blue Cross to merge hospitals' case mix and billing data (IDD project)
- Board votes to revise data sharing agreement to permit identifying hospitals without their veto
- First Independent Research published:
 - Patient Origin (1978 data)
 - Case Mix by Community (1978 data)

SEPT 1980 - AUG 1981

- Dr. Francis Moore elected President
- Data sharing agreements renewed with hospitals
- TRC supervises DRG report design
- Case mix conference co-sponsored with Brandeis
- Over 80 data requests processed to date
- Integrated Data Demonstration (IDD) funded for 3 years
- Rate Setting Commission promulgates case mix and charge data regulations
- Independent Research published:
 - DRG Report Series (1978 data)

SEPT 1981 - AUG 1982

- New Members: — Massachusetts Federation of Nursing Homes
- Office of Health Policy, Executive Office of Human Services
- HCFA terminates all IDD grants
- Negotiations with Rate Setting Commission to be designated as their data processor
- Publication of statewide survey of hospital data systems
- HSA & PSRO funding cuts — result in fewer Board seats
- Five statewide conferences assist hospitals to merge case mix and charge data and to use reports
- Independent Research published:
 - Hospital Utilization Series: Patient Origin, Migration, Use Rates (1980 data)
 - DRG Series (1980 data)

SEPT 1982 - AUG 1983

- New Members: — Massachusetts Business Roundtable
 - Massachusetts Association of HMOs
- New data sharing agreement with hospitals for FY1982, FY1983 and FY1984 data
- HSA IV Study on Surgical Area Variations
- Massachusetts Eye and Ear Infirmary nursing study funded by Blue Cross/MHA Fund
- Personal computer seminars
- Case studies on using case mix data with Harvard School of Public Health (funded by Committee of the Permanent Charity Fund)
- Self-sufficiency without federal revenue
- Massachusetts Hospital Association reduces seats on Board for balance with state and HSA
- Independent Research published:
 - Market Position Series (1980 data)
 - Clinical Specialty Series (1980 data)

SEPT 1983 - AUG 1984

- ON-LINE ACCESS developed as a joint venture with Data Resources, Inc. (1982 data)
- CIGNA Foundation's coalition grant for "Data Digest" — compendium highlighting trends in hospital utilization
- Created unique physician identifier to settle suit by Massachusetts Medical Society against Rate Setting Commission
- Study on Variations in Surgery released at press conference
- Benjamin Rose Institute (Cleveland) selects Consortium to manage national long term care data base feasibility study
- Microcomputer seminars for physicians and hospital executives
- Work begins on FY1983 merged data base
- Self-sufficiency without federal funding
- Conference management with Boston University School of Nursing
- Independent Research published:
 - Hospital Utilization Series (1982 data)
 - DRG Series (1982 data)
 - Market Position Series (1982 data)
 - Clinical Specialty Series (1982 data)

SEPT 1984 - AUG 1985

- ON-LINE ACCESS expanded to include "dial-up" and "down-load" (to PC's) using FY1983 and 1982 data
- Submitted Final Report to Massachusetts Eye & Ear Infirmary (Blue Cross/MHA Fund) on study of variations in nursing costs
- Yale University researchers request the nursing/case mix data base for a HCFA study on nursing weights for DRG reimbursement
- CIGNA Foundation funds two projects: hospital price guide and ambulatory data base

SEPT 1984 - AUG 1985 Continued)

- Jessie B. Cox Charitable Trust and Robert Wood Johnson Foundation fund statewide study of coronary heart disease: treatment options and practice patterns of hospitals
- Final Report to Benjamin Rose Institute (Ohio) and Retirement Research Foundation on the feasibility of a national long term care data base (C.O.M.P.A.R.E.)
- Consortium Training Institute study initiated
- Massachusetts General Hospital selects Consortium to build data base for outpatient cardiac catheterization study (BC/MHA Fund)
- Massachusetts Medical Society contracts with Consortium to determine number of physicians participating in Medicaid
- Self-sufficiency without federal revenue
- Independent Research published:
 - Hospital Utilization Series: Patient Origin by Hospital (1983)
 - DRG Series (1983 data)
 - Market Position Series (1983 data)
 - Clinical Subspecialty Series (1983)
 - Comparative Charges by DRG and by Hospital (1983 data)

SEPT 1985 - AUG 1986

- New Member: Board of Registration in Medicine
- Strategic plan developed at Board retreat
- Transition Fund meets first year goals in Corporate contributions
- ON-LINE ACCESS updated with FY 1984 data base
- Preliminary Price Guide circulated to hospitals
- Women & Infants Hospital (R.I.) selects Consortium to process data for national perinatal study
- Boston University School of Management study on: Hospital Cost to Charge Ratios
- Collaboration with Health Planning Council for Greater Boston on: rates of hospitalization for the elderly, and costs of preventable disease
- Created automated renewal files for the Board of Registration in Medicine
- Self-sufficiency without federal revenue
- Independent Research published:
 - Hospital Utilization Series: Patient Origin by Hospital and by Community (1984 data)
 - DRG Series: Hospital Case Mix Ratios; Outlier & Mortality Reports (1984 data)
 - Market Position Series (1984 data)
 - Clinical Subspecialty Series (1984 data)
 - Comparative Charges by DRG and Hospital (1984 data)
 - Health Care Tabs (multi-year trend analysis)

SEPT 1986 - AUG 1987

- Dr. Frederick Ackroyd elected as third President
- New Members: MA Association of Community Health Agencies and Mass. Peer Review Organization, Inc.
- Transition Fund exceeds second year goals in corporate contributions
- ON-LINE ACCESS available with two years of data ('84 & '85)
- Hospital Price Guide ('85 data) released to general public
- AIDS analysis completed for Mass. Senate Post Audit Committee
- High Cost Infant analysis completed for Senator Kennedy
- Collaboration with Millipore Corp. on employee benefits survey
- Legislation (filed by Rep. Clapproad) for Long Term Care Data Base
- National Center for Health Services Research adds Consortium data to its Hospital Care Utilization Project
- Self-sufficiency without federal funds
- Independent Research published:
 - Hospital Utilization Series: Patient Origin by Hospital and by Community (1985 data)
 - DRG Series: Hospital Case Mix Ratios; Outlier & Mortality Reports (1985 data)
 - Market Position Series (1985 data)
 - Market Position Trend Analysis ('83, '84, '85)
 - Clinical Subspecialty Series (1985 data)
 - Comparative Charges by DRG and Hospital (1985 data)
 - Hospital Price Guide (1985 data)
 - Payor Mix Trend Analysis ('83, '84, '85)

TESTIMONIALS FROM OUR CLIENTS...

"The service orientation to data users, in concert with its comprehensive population-based hospital utilization statistics, distinguishes the Consortium from many other data collection organizations"

David Robbins, Vice President-Administration and Research
Health Insurance Associations of America

"The Massachusetts Medical Society relies heavily on the accuracy and impartiality of the data published by the Consortium."

Barbara A. Rockett, M.D.
Past President, Massachusetts Medical Society

"The intelligent introduction of change depends upon an accurate data base. Publications of the Consortium help meet that need."

Carol M. McCarthy, Ph.D.
President, American Hospital Association

"Once investigators have access to a resource like the Massachusetts Health Data Consortium, they wonder how they ever got along without."

Harvey V. Fineberg, M.D.
Dean, Harvard School of Public Health

"The Massachusetts Health Data Consortium exemplifies how the various key actors in a state's complex health care system...each benefit by establishing and maintaining a system for data sharing.... Research designed to assure the nation the best return in health for its large investments in health services will be advanced immeasurably when more states follow Massachusetts' pioneering lead."

Katharine Bauer Sommers
Scholar in Residence, National Academy of Sciences

"The output from [the Consortium] has a particularly balanced viewpoint which is important to deliberations of health policy in Massachusetts.... I believe that the active cooperation of all sectors of the community is important to the success of the Consortium."

Grant V. Rodkey, M.D., Visiting Surgeon, Massachusetts General Hospital Associate Clinical Professor of Surgery, Harvard Medical School

"Whether we are researchers, administrators of hospitals, legislators, or health care consumers worried about rising costs, the Massachusetts Health Data Consortium is one place we all can turn to for reliable and up-to-date information."

Merle W. Mudd, Ph.D.
Executive Director, The Medical Foundation

"In the past, we have used MHDC data primarily in the preparation of Determination of Need applications, for comparative utilization studies, and for service area definitions. The Consortium offers a highly valuable and reliable resource for planning, analysis and evaluation in today's complex health care scene. We in Massachusetts are fortunate to have it."

Jerome H. Grossman, M.D.
President, New England Medical Center Hospitals

"We can't assess how well the state's done in reducing overall utilization unless we have a database such as yours which encompasses all patients...."

Edward Moscovitch
Executive Director, Massachusetts Municipal Association

"Although we are not a hospital in Massachusetts, we serve many Massachusetts residents. In our recent strategic planning process, we found the information provided by the Massachusetts Health Data Consortium to be accurate and timely."

Thomas G. Parris, Jr.
President, Women & Infants Hospital of Rhode Island

"The Massachusetts Health Data Consortium was selected, in a national competition, to receive two awards from the CIGNA Foundation because its project proposals represented the leading edge in health data development. The results of these projects demonstrated the professional and technical expertise that mark the Consortium as one of the superior health data brokers in the country."

Robert E. Patricelli
President & CEO, Value Health, Inc.

"The information provided by the Massachusetts Health Data Consortium allows us to serve clients in Massachusetts much more efficiently, with more useful information for future planning than is available in most areas. The existence of this consortium also significantly lowers the cost of these analyses for providers planning for future service needs."

Jack Kasten
Vice President, Arthur D. Little, Inc.

"The plans of the Massachusetts Health Data Consortium to expand its data base to include long-term care is indeed welcome news. With the dramatic growth in the numbers of very old persons and their need for long-term services, data are critically needed on which planners, policy makers, and service providers can base their present and future decisions. The lack of uniform data, particularly in community services, is a void which I know the MHDC will fill."

Barbara Silverstone, DSW
Executive Director, the New York Association for the Blind

"The Massachusetts Health Data Consortium was a rare kind of organization when it was founded in 1978. As the number and kinds of provider organizations have proliferated, as government strives to find ways to contain the costs of health care, and as the people in general strive to understand an increasingly complex health care system, the need for objective data, and for the Massachusetts Health Data Consortium to provide it, is greater than ever and will likely continue to be so in the future."

Paul M. Densen, Sc.D., Professor of Community Health and Medical Care Emeritus, Harvard Medical School

"Sooner or later most investigators concerned with health care in Massachusetts will find the Consortium's data to be an important tool in their research efforts."

William B. Schwartz, M.D., Vannevar Bush University
Professor of Medicine, Tufts University School of Medicine

"The Massachusetts Health Data Consortium is a cooperative venture involving organizations that produce and use hospital discharge and related data that has established a reputation of reliability and objectivity."

David M. Kinzer
Past President, Massachusetts Hospital Association

"The Population-based analysis made possible by your data collection has served the needs of health researchers, hospitals, planning agencies, and public officials. The Health Data Consortium's plan to expand its data base to include ambulatory care, mental health, and long-term care is an especially welcome development that promises to make the Consortium a truly universal source of health data."

Bruce C. Vladeck, Ph.D.
President, United Hospital Fund of New York

"The Massachusetts Health Data Consortium is one of the few such health data banks in the country where we could obtain the data we needed to refine our strategic planning process and more effectively analyze the changing use patterns of patients in our service area. Without the Consortium, we would have had to rely on less-specific, non-population based data to educate our constituents."

Robert R. Fanning, Jr.
President, Beverly Hospital

"What is so exciting to me is that the Consortium has successfully become self-sufficient by sharing the costs of services among member organizations.... The Massachusetts Health Data Consortium is one of the few such health data brokers in the country that provide all-inclusive statewide data on hospital discharges."

Dorothy P. Rice, Professor, University of California at San Francisco
Former Director, National Center for Health Statistics

"Without access to (the Consortium's) centralized comprehensive data base, researchers would face the virtually impossible task of creating its equal from many sources at considerable expense in both time and money."

Richard H. EgdaHL, M.D.
Director, Boston University Medical Center

"(Consortium) patient origin reports were used...in the planning for our major new inpatient tower...for documenting the broad service area from which Children's Hospital draws its patients. They were instrumental in substantiating our bed need projections and gaining regulatory approval for our building project."

David S. Weiner
President, The Children's Hospital

"The Consortium is a unique resource for Massachusetts. The Consortium can provide valuable information in these dynamic times, when change is inevitable and adequate data become more important than ever for making wise decisions."

H. Richard Nesson, M.D.
President, Brigham and Women's Hospital

"Individual companies and regional coalitions could be well-served by access to (the Consortium's) health care cost information."

John Larkin Thompson
President, Blue Cross Blue Shield of Massachusetts

CONTRIBUTORS

In addition to the support from its members and collaborators, the Consortium has received financial assistance in the form of grants or contributions from the following organizations:

Bank of Boston

Bank of New England

Blue Cross/MHA Fund for Cooperative Innovation (on grants to Mass.
Eye & Ear Infirmary; Mass. General Hospital)

Boston Edison Foundation

The Boston Globe

CIGNA Foundation

The Boston Foundation (formerly Committee of the Permanent Charity Fund)

Computervision

Dennison Corporation

Fidelity Non-Profit Management Foundation

Health Care Financing Administration

Jessie B. Cox Charitable Trust

John Hancock Mutual Life Insurance Company

June Rockwell Levy Foundation

Kendall Company

Liberty Mutual Insurance Company

Mitre Corporation

National Center for Health Statistics

The New England

New England Telephone Company

H. Gilman Nichols, Jr.

Norton Company

Parker Brothers

Polaroid Corporation

Raytheon Company

Retirement Research Foundation (for the Benjamin Rose Institute)

Robert Wood Johnson Foundation

Shawmut Bank

Stone & Webster

Unitrode

Walnut Charitable Trust

Zayre Corporation

CURRICULUM VITAE
Frederick W. Ackroyd, M.D.
President

Dr. Frederick W. Ackroyd trained in surgery at the Massachusetts General Hospital in Boston, and did further training in cardiothoracic surgery in England.

After graduating from Brown University and Boston University School of Medicine, he started his long association with Harvard Medical School as an Instructor in Surgery at the Boston City Hospital, while also engaged in research in liver disease at the Sears and Thorndike Laboratories. He became Chairman of the Department of Surgery at Mount Auburn Hospital, a Harvard teaching hospital, in 1970. He moved to Mt. Sinai Medical Center in Miami to become Chairman of the Department of Surgery and he was Professor of Surgery at the University of Miami School of Medicine. Since 1982 Dr. Ackroyd has assumed duties in the Surgical Unit of the Ambulatory Care Center, the Trauma Service, and the Surgical Endoscopy Unit of the Massachusetts General Hospital.

Dr. Ackroyd is a member of a number of academic surgical societies, and has published numerous articles in surgical journals on surgical gastroenterology, trauma, and burns.

Dr. Ackroyd's naval service included tours of duty with the Marines during the Suez Crisis and in Aviation Medicine as a flight surgeon in Antarctica with the British Trans-Antarctic Expedition led by Sir Edmund Hilary and Sir Vivien Fuchs. In 1967, he served in Viet Nam as a surgeon with the Third Marine Amphibious Force in Da Nang.

Dr. Ackroyd served as a consultant to the United Nations Secretary General, Kurt Waldheim, and was a participant in the 1974 SALT-3 deliberations in Geneva to limit incendiary weapons.

As Chairman of the Committee on Trauma for the Massachusetts Chapter of the American College of Surgeons, he has been collaborating with a group of trauma surgeons from the designated trauma centers across the state to develop a trauma network with standard protocols to improve the quality of care of the injured.

Dr. Ackroyd's professional interests have expanded to include health management and health policy with studies at the Harvard Business School. At the University of Miami Graduate School of Business Administration where he received his M.B.A. and M.P.A., his thesis focused on the cost of regulation in health care.

Personal involvements include terms of office of President of the Cambridge Boy Scouts, service as a trustee of Dexter School, and membership on the Board of Cambridge Savings Bank.

Dr. Ackroyd was elected President of the Massachusetts Health Data Consortium in 1987 as its third President succeeding Dr. Paul Densen and Dr. Francis D. Moore. Dr. Ackroyd's objectives are to assist health planners, providers, third parties, and regulators who seek to fine tune the system: to make it more responsive to the patients, more rational to its critics, and more cost effective to the public.

CONSORTIUM STAFF

Elliot Stone, Executive Director

Since 1978, Mr. Stone has been Executive Director of the Consortium. He is responsible for directing the professional staff which assembles, maintains and analyzes the statewide hospital data base. Mr. Stone has designed the Consortium's studies that compare hospitals' case mix (DRGs), hospital charges and community-specific utilization rates. He has been the principal investigator on numerous hospital care studies and is sought nationally as a speaker in the field of medical care data collection and retrieval.

Over the past 21 years he has held positions in both the private and public sectors. He began his career with John Hancock Mutual Life Insurance Company as a computer systems analyst working with that carrier's large data bases. At Honeywell Information Systems' Marketing Division, Mr. Stone was a Senior Instructor training customers for the implementation of hospital accounting systems. As a Project Director for the Massachusetts Executive Office of Human Services, Mr. Stone implemented the first computer systems for the state's Boards of Registration for health professionals. In 1976, the Commissioner of Public Health appointed him Director of the Division of Health Statistics in the Office of State Health Planning. In this capacity he was responsible for the coordination of surveys and publications for all 2,000 health facilities, 150,000 health professionals and the state's vital statistics registration and reporting system.

The Massachusetts Public Health Association presented Mr. Stone with its prestigious Alfred L. Frechette award in recognition of his contributions to health care in the state.

Debra J. Lerner, Ph.D., Director of Research and Product Development

Dr. Lerner brings to the Consortium more than ten years of experience in research and evaluation. Prior to joining the Consortium's staff, she was associated with the Cardiovascular Health Services Research Group at Boston City Hospital and the Boston University School of Medicine. In 1986, she was awarded a Dissertation Research Grant from the National Center for Health Services Research. Dr. Lerner has a M.S. in Health Planning/Administration from the University of Cincinnati and a Ph.D. in Sociology (Medical) from Boston University.

At the Consortium her role involves formulating the organization's yearly research strategy with the Board and Technical Review Committee as well as carrying out collaborative research projects with representatives from academia, business and public agencies. In addition, Dr. Lerner will be actively involved in the development of new analytical products using the Consortium's Hospital Data Base.

Catherine Comstock, Senior Programmer/Analyst

Mrs. Comstock has 25 years of experience in the data processing field including 17 years in medical data processing. She worked for three years at Massachusetts Hospital Association's Utilization Information Service where she wrote programs to edit and merge PSRO data, prepare PSRO tapes for submission to the federal government and perform payor analyses. Prior to joining the Consortium staff, she was a consultant for Arthur D. Little on the Massachusetts Medicaid Information System (MMIS) project.

At the Consortium she has been involved in the design and programming of major products such as the Patient Origin Reports, the Case Mix Analysis Reports by DRG, as well as various special studies including small area variation studies a statewide coronary heart disease study, and a study of hospital market areas using data from Mass. and four other states. She holds a M.P.H. Degree in medical research from the Boston University School of Medicine.

Susan L. Carman, Conference Manager

Ms. Carman is responsible for coordinating all of the Consortium's conferences and annual meeting. She is also available to assist member organizations with Conference Management.

Ms. Carman worked as the Administrative Assistant for the Consortium from July, 1978 through December, 1983. She then went to the Workers Compensation Research Institute in Cambridge, MA for two years and rejoined the Consortium.

Mary Anne Patella, Manager, Data Base Services

Ms. Patella, RRA, received her Bachelors of Science in Medical Record administration from Northeastern University. She is responsible for marketing Baseline Reports as well as the coordination and processing of ad hoc data requests. She is also responsible for developing and implementing data quality protocols and assisting in the development of report specifications, documentation and analyses. Prior to joining the Consortium staff, Ms. Patella was Assistant Director of the Medical Record Department at University Hospital.

Richard Senicola, Data Base Manager

Mr. Senicola is responsible for building the Consortium's annual data base through coordination with hospitals and other data sources. Mr. Senicola manages the production and distribution of all Reports and Methodologies. He is currently pursuing his Master's degree at Boston University School of Public Health. He has extensive medical background and experience, and is a certified Physician Assistant and Emergency Medical Technician. He received his Bachelor degree in Business Administration from Seattle City University in Washington.

Joseph Musolino, Programmer/Analyst

Mr. Musolino is responsible for the merging of all hospital data, for the creation of uniform formats for the annual data base, and for the production of various Consortium reports. He is also responsible for the management of special data processing projects and the technical aspects of the Consortium's Data Express service, as well as for the development of microcomputer-based software.

Prior to joining the Consortium staff, Mr. Musolino was the Network Specialist and Laboratory Coordinator at the Cambridge Institute for Computer Programming, as well as Medical Administrative ADP Co-Coordinator and Statistician at the Veterans Administration Medical Center in Boston.

Linda Jackson, Consultant, Office Manager

Ms. Jackson joined the Consortium staff as Office Manager to oversee personnel policies and financial matters. The three years prior to joining the Consortium she was employed by the Reading school system. She was employed by Middlesex County at the Registry of Deeds in Cambridge for seven years.

CONSORTIUM MEMBERSHIP

PROVIDERS

Massachusetts Hospital Association
Stephen Hegarty, President

Massachusetts Federation of Nursing Homes
Alan Solomont, President
Abraham Morse, Executive Vice President

Massachusetts Medical Society
William M. McDermott, M.D., Executive Vice President
J.J. Siragusa, M.D.

Massachusetts Association of Community Health Agencies
Mary Farnsworth, President
Patricia Page, Executive Director

Massachusetts Nurses Association
Marie Snyder, R.N., M.S., J.D., President
Anne Hargreaves, R.N., Executive Director

STATE GOVERNMENT

Department of Public Welfare
Charles Atkins, Commissioner

Office of Health Policy, Executive Office of Human Services
Philip W. Johnston, Secretary
Matthew Fishman, Assistant Secretary
Mary Ann Hart, Director

Board of Registration in Medicine
Andrew G. Bodnar, M.D., J.D.
Barbara Neuman, Executive Director

PLANNING AGENCIES

Central Massachusetts Health Systems Agency
James Demetry, Ph.D., President
Mara Yerow, Executive Director

Health Planning Council for Greater Boston
Lewis Pollack, President
Charles L. Donahue, Jr., Executive Director

Northeast Health Planning Council
Daniel O'Leary, President
Ed Marakovitz, Executive Director

Consortium Membership, Continued

Western Massachusetts Health Planning Council

Steven Kammell, Executive Director
Leslie T. Laurie, President

Southeastern Massachusetts Health Planning and Development, Inc.

Susan Leclair, President
John Nay, Executive Director

Massachusetts Statewide Health Coordinating Council

Steven Tringale, President

PROFESSIONAL REVIEW ORGANIZATION (PRO)

Massachusetts Peer Review Organization

Brenda Richardson, M.D., President
Tera Younger, Executive Director

INSURERS

Blue Cross Blue Shield of Massachusetts

John Larkin Thompson, President

Health Insurance Association of America

Carl Schram, President
Stanley Peck
Elizabeth Rothberg
Richard Fraites, Chairman, MA Chapter

HEALTH MAINTENANCE ORGANIZATIONS (HMOs)

Massachusetts Associations of HMOs

William A. Schlag, President
Robert L. Hughes, Executive Director

BUSINESS

Massachusetts Business Roundtable

Edward E. Phillips, Chairman
John D. Crosier, President

BOARD OF DIRECTORS

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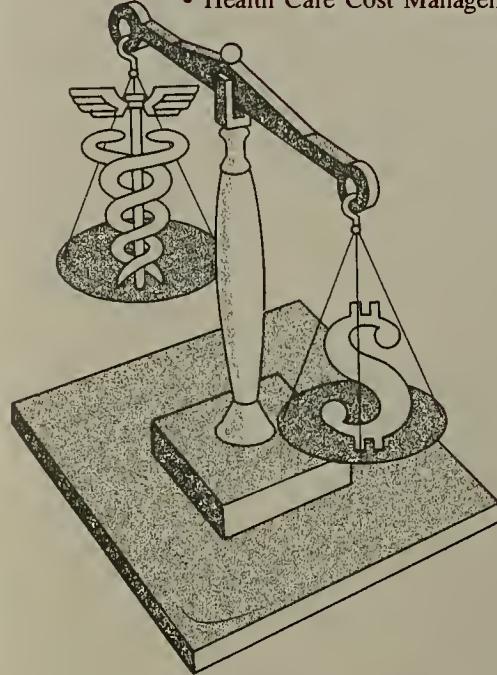
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THE FUTURE OF HEALTH CARE: PUBLIC CONCERN AND POLICY TRENDS

- Medical Practice
- Long Term Care Insurance
- Health Care Cost Management



FRIDAY, MAY 6, 1988
FRIDAY, MAY 20, 1988
FRIDAY, JUNE 24, 1988

Boston Park Plaza Hotel & Tower
Boston, MA

PRESENTED BY:

The Boston Globe

WNEV-TV 7

WBUR RADIO

MASSACHUSETTS HEALTH DATA
CONSORTIUM, INC.

IN COOPERATION WITH:

THE CHALLENGE TO LEADERSHIP Project

Mass Health Data Consortium, Inc.
400-1 Totten Pond Road
Waltham, MA 02154

HEALTH POLICY SERIES
May 6, May 20, June 24

PARTICIPANTS

Frederick W. Ackroyd, M.D., is the President of the Massachusetts Health Data Consortium and Associate Visiting Surgeon, at Massachusetts General Hospital.

Robert M. Ball, was the U.S. Commissioner of Social Security from 1962 to 1973. Currently Mr. Ball is the Chair of the Board, National Academy of Social Insurance.

Mr. Ball will present the case for a comprehensive public program supplemented by private insurance.

Robert J. Blendon, Sc.D., is Professor and Chairman in the Department of Health Policy and Management at the Harvard School of Public Health.

Jean Dietz, has been the Senior Staff Reporter for the The Boston Globe for two years. She is a veteran reporter on social welfare and health issue.

Jeff C. Goldsmith, Ph.D., is the President of Health Futures, Inc., and National Advisor at Ernst & Whinney. Dr. Goldsmith is a consultant and strategic planning advisor to the largest health care organizations. He is a lecturer at the Graduate School of Business at the University of Chicago.

Dr. Goldsmith will argue that the market place represents a more powerful tool for achieving public policy objectives than centralized government control over health care financing and delivery.

Senator John P. Houston, was elected to the Massachusetts State Senate in 1984 representing the First Worcester and Middlesex District. Senator Houston is the Senate Chairman for the Special Commission on Elderly Health Care.

David Kinzer, is Lecturer on Health Policy and Management at the Harvard School of Public Health and former President, Mass. Hospital Association, 1973-1985.

SERIES SCHEDULE:

8:00 a.m. Registration and Breakfast
8:45 a.m. Welcome, *Frederick W. Ackroyd, M.D.*, Moderator, *Robert Blendon*, May 6
9:00 a.m. *Stephen M. Weiner*, May 20 & June 24

FRIDAY, MAY 6

“Medical Practice: Has Cost Consciousness Become Too Important?”

Speakers: *George Lundberg, M.D.*
Journal of the A.M.A.

Uwe Reinhardt, Ph.D.
Princeton University

Reactors: *Alan Xenakis, M.D.*
WNEV-TV

J.J. Siragusa, Jr., M.D.
Massachusetts Medical Society

FRIDAY, MAY 20

“Long Term Care Insurance: Public or Private Program?”

Speakers: *Robert M. Ball, MA*
Former U.S. Commissioner, Social Security

Gail Schaeffer, F.S.A.
John Hancock Mutual Life

Reactors: *Jean Dietz*
The Boston Globe
John P. Houston
Massachusetts State Senate

FRIDAY, JUNE 24

“Health Care Cost Management: Has the Private Sector Lost Its Chance?”

Speakers: *Jeff C. Goldsmith, Ph.D.*
Health Futures, Inc.

Jonathan Lomas, MA
McMaster University, Ontario

Reactors: *Margo Melnicove*
WBUR Radio
David Kinzer
Harvard School of Public Health

PARTICIPANTS

Jonathan Lomas, MA, is the Associate Coordinator of the Center for Health Economics and Policy Analysis at McMaster University, Hamilton, Ontario. He has authored articles which compare the regulatory and competitive approaches to health cost control drawing on both his own Canadian as well as American experience.

Professor Lomas will argue that effective cost control requires significant government involvement in health care delivery.

George D. Lundberg, M.D., has been the Editor of the Journal of the American Medical Association for six years. He is an academic pathologist.

Dr. Lundberg will argue that the patients' care comes first and that quality of care and quality of life must mesh.

Margo Melnicove, is a reporter for WBUR Radio, a National Public Radio Affiliate.

Uwe Reinhardt, Ph.D., is the James Madison Professor of Political Economy, Woodrow Wilson School, Princeton University. He is a member of the Physician Payment Review Commission created by Congress.

Professor Reinhardt will argue that cost containment would hurt patient care only if there were cost containment — in fact there has not been any yet.

Gail P. Schaeffer, F.S.A., is the Director of the Long Term Care Insurance Division at The John Hancock Mutual Life Insurance Company. She is a Fellow in the Society of Actuaries.

Ms. Schaeffer will explain how insurance can solve the long term care financing dilemma and will discuss the problems associated with public insurance programs.

J.J. Siragusa, Jr., M.D., is the President of the Massachusetts Medical Society.

Elliot M. Stone, has been the Executive Director of Massachusetts Health Data Consortium since 1978.

Stephen M. Weiner, Esq., has been a Partner at Goulston & Storrs since 1981. He is the former Chairman of the Mass. Rate Setting Commission as well as the former Director of the Center for Law & Health Sciences and Associate Professor of Law at Boston University School of Law.

Alan Xenakis, M.D., is the Medical Reporter
for WNEV-TV Channel 7.

Dear Colleague,

Massachusetts is experimenting locally with approaches to national health care issues such as: *universal health insurance, malpractice reform, balance billing, hospital revenue controls and long term care insurance.*

As a result of these initiatives by experts in health policy, the Massachusetts layman is bombarded with information. The purpose of the Consortium's three seminars is to facilitate the public's understanding of these complicated health care issues. We expect a broad audience from business, labor, insurers, government, consumer groups and the media to participate in these programs.

The Program Advisory Committee has invited nationally prominent speakers to address these timely subjects in a point/counter-point format. We expect that this approach will promote a lively discussion and encourage audience participation.

The Massachusetts Health Data Consortium is celebrating its 10th Anniversary. Our mission is to serve as a neutral, independent "broker" of sensitive health care information to public and private agencies.

We appreciate the support of our members, co-sponsors, advisory committee and corporate contributors in making these seminars possible.

Sincerely,

Frederick W. Achrey, M.D. Elliott M. Stone

Frederick W. Ackroyd, M.D. Elliot M. Stone
President *Executive Director*

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Health Planning & Development Council • Western Mass. Health
Planning Council.

REGISTRATION:

Location:

Boston Park Plaza Hotel & Towers
One Park Plaza at Arlington Street
Boston, MA

Seminar Dates:

Friday, May 6, 1988 8:00 a.m.—11:00 a.m.
Friday, May 20, 1988 8:00 a.m.—11:00 a.m.
Friday, June 24, 1988 8:00 a.m.—11:00 a.m.

Registration Fee: Choose to attend individual seminars at \$75 each or save \$50 by registering for all three seminars (\$175). Registration fee includes breakfast and transcripts of all seminars.

NAME: _____

POSITION: _____

ORGANIZATION: _____

ADDRESS: _____

TELEPHONE: _____

Please check seminar(s) you wish to attend:

May 6, 1988 May 20, 1988 June 24, 1988

Amount Enclosed \$ Xpert - EMS
(\$175/person for series or \$75/person for individual seminars)

Make checks payable and mail to:

Massachusetts Health Data Consortium, Inc.
400-1 Totten Pond Road, Waltham, MA 02154

Please copy this form for registering additional persons.

REGISTRATION DEADLINE:
SEVEN WORKING DAYS PRIOR TO EACH SEMINAR

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Northeast Health Planning Council
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Massachusetts Statewide Health Coordinating Council

PRO

Massachusetts Peer Review Organization, Inc.

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Health Insurance Association of America
Massachusetts Association of HMOs

Business

Massachusetts Business Roundtable

"The Consortium is the most capable, independent organization to carry out the sensitive work of helping the business community evaluate the quality, cost and accessibility of the state's health care system."

**Donald R. Melville
Former Chairman and President
Norton Company**

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400-1 Totten Pond Road
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MASSACHUSETTS HEALTH DATA CONSORTIUM



AN INVESTMENT

IN RESEARCH,

EDUCATION AND

INFORMATION

FOR THE HEALTH CARE SYSTEM

VITAL HEALTH CARE INTELLIGENCE

Since 1978 a unique coalition of hospital providers, physicians, researchers, business executives and public health officials have worked together for a crucial public interest:

To improve the quality and affordability of medical care for every person in Massachusetts.

The Massachusetts Health Data Consortium works behind the scenes to support sensitive health care planning and regulation in this Commonwealth. By providing vital information on hospital care, the Consortium helps state health officials, hospitals, planners, employers and insurers evaluate how well the health care system is serving people and how efficiently it is functioning.

"(Consortium) patient origin reports were instrumental in substantiating our bed need projections and gaining regulatory approval for our building project."

**David S. Weiner, President
The Children's Hospital**

"The Consortium offers a highly valuable and reliable source for planning, analysis and evaluation in today's complex health care scene."

**Jerome H. Grossman, M.D.
President
New England Medical Center**

The Consortium monitors the diagnosis, treatment, costs and outcomes of all patients cared for in the hospitals of Massachusetts.

- Hospital administrators rely on the Consortium to evaluate and respond to the changing needs of the communities they serve: Do their patients need new services? How do their costs and performance compare with comparable providers? Are their communities changing? Are there needs for more elderly services? More pediatric services? Are the needs of Medicare recipients changing?
- Public health officials require the information gathered by the Consortium to monitor treatment quality and detect any trends that effect public health: How do surgical rates vary by community? Are heart disease patients in one part of the state less able to obtain adequate hospital care? How do HMOs and hospital care plans compare in their care? In their efficiency?
- The data provided by the Consortium is also used by employers and insurance companies to evaluate and compare health care providers, manage group health care plans and control expenditures.

"Individual companies and regional coalitions could be well-served by access to (the Consortium's) health care cost information."

**John Larkin Thompson, President
Blue Cross Blue Shield of Massachusetts**

"Once investigators have access to a resource like the Massachusetts Health Data Consortium, they wonder how they ever got along without it."

**Harvey V. Fineberg, M.D., Dean
Harvard School of Public Health**

EDUCATION AND TRAINING

When Medicare and Medicaid payments were re-structured in Massachusetts, the Consortium held seminars in the language and computer technology of the new DRG system to help hospital staff and physicians adjust to the changes and keep medical systems working well.

Among the other seminars the Consortium has sponsored are: effective health quality measurement; evaluating managed care; new issues in long term care; an exploration of financial relationships between hospitals and medical staffs; and an introduction to cost accounting systems.

PUBLIC POLICY RESEARCH

The Consortium conducts public policy research on some of the most pressing health problems in the state such as:

Coronary heart disease. With funding from the Jessie B. Cox Foundation and the Robert Wood Johnson Foundation, the Consortium is conducting the first state-wide investigation into the demographics, severity, treatment and case fatality rates of coronary heart disease.

Monitoring groups at risk. With funding from the Boston Foundation and the Fidelity Non-Profit Management Foundation, the Consortium is collaborating with the Health Planning Council for Greater Boston to assess the health care of the uninsured, the frail elderly and children.

Long-term care for the elderly. The Consortium developed models for a national system to monitor care of the elderly with funding from Retirement Research Foundation and Benjamin Rose Institute.

"The Massachusetts Medical Society relies heavily on the accuracy and impartiality of the data published by the Consortium."

**Barbara A. Rockett, M.D., Past President
Massachusetts Medical Society**

THE TASK AHEAD

The Consortium is extending its scope with a new program to *monitor, compare and allow in-depth evaluation of all health care providers in the state, not just hospitals.*

The demand for lower health care costs has created a multitude of new health care delivery arrangements and new financing mechanisms — outpatient clinics, managed care plans, home health agencies — for patients from rich to poor. The changes that are emerging in health care must be monitored and evaluated to insure that cost savings are balanced with the continued well-being of patients.

The task ahead is enormous. There are as many as 30 million medical episodes annually outside of hospitals in Massachusetts. In addition, the Consortium must develop new reports and analyses from its existing data on hospital care.

As a private, independent agency that involves every sector of the state's health care system, the Consortium is uniquely qualified and equipped to do this job. In collaboration with leading scholars, the staff of the Consortium have already conducted feasibility studies and mapped out appropriate structures for this vitally important monitoring system.

"The Consortium can provide valuable information in these dynamic times, when change is inevitable and adequate data become more important than ever for making wise decisions."

**H. Richard Nesson, M.D., President
Brigham and Women's Hospital**

"Without access to (the Consortium's) centralized comprehensive data base, researchers would face the virtually impossible task of creating its equal..."

**Richard H. Egdahl, M.D., Director
Boston University Medical Center**

PRESIDENT

Frederick W. Ackroyd, M.D.
Associate Professor of Surgery
Massachusetts General Hospital

Dr. Frederick W. Ackroyd graduated from Brown University and Boston University School of Medicine. Since 1982 Dr. Ackroyd has assumed duties in the Surgical Unit of the Ambulatory Care Center, the Trauma Service and the Surgical Endoscopy Unit of the Massachusetts General Hospital. Dr. Ackroyd has also chaired the Departments of Surgery at Mount Auburn Hospital, Cambridge MA and Mt. Sinai Medical Center in Miami, FL.

As Chairman of the Committee on Trauma for the Massachusetts Chapter of the American College of Surgeons, he has been collaborating with a group of trauma surgeons from the designated trauma centers across the state to develop a trauma network with standard protocols to improve the quality of care of the injured.

Dr. Ackroyd's professional interests have expanded to include health management and health policy with studies at the Harvard Business School. At the University of Miami Graduate School of Business Administration where he received his M.B.A. and M.P.A., his thesis focused on the cost of regulation in health care.

EXECUTIVE DIRECTOR

Elliot M. Stone

Elliot Stone has been Executive Director of the Consortium since its founding in 1978. He was responsible for the design of the Consortium's state-wide data system and for obtaining the participation of the state's acute care hospitals for the Utilization Report series.

Prior to the founding of the Consortium, Mr. Stone served as Project Director in the Massachusetts Executive Office of Human Services and was subsequently Director of the Division of Health Statistics in the Department of Public Health.

In recognition of his contributions to health care in the state, Mr. Stone was awarded the prestigious Alfred L. Frechette award by the Massachusetts Public Health Association. He is sought nationally as a speaker and teacher in the field of medical care data collection, retrieval and analysis.

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United Paperworkers' Corporate Campaign

United Paperworkers International Union, AFL-CIO, P.O. Box 1475, Nashville, TN 37202

UPIU Local 6288, AFL-CIO, 342 Main Ave., De Pere, WI 54115

UPIU Local 1787, AFL-CIO, P.O. Box 773, Lock Haven, PA 17745

UPIU Local 14, AFL-CIO, P.O. Box 272, Jay, ME 04239

UPIU/IBEW Joint Bargaining Committee, 1105 N. Wilson Ave., Prichard, AL 36610

Dear Brothers and Sisters:

As you know, the International Paper Co. has kept more than 3,500 members of the UPIU, the IBEW, and the International Brotherhood of Firemen and Oilers in Jay, Maine and three other locations locked out or on strike for a year or more.

Since the beginning of the year we've carried out a Corporate Campaign against IP that has included sending caravans of striking and locked out workers on the road to spread word of the dispute as well as putting pressure on IP's corporate allies, including Bank of Boston Corp., which shares director Donald McHenry with IP.

In March it appeared that IP was ready to begin bargaining fairly, and as a sign of good faith we put our campaign on hold for several weeks. Yet it soon became clear that IP was only buying time, and their new offer was still a travesty of collective bargaining. The 3,500 workers at the four locations voted overwhelmingly in April to reject the company's proposal, which would have kept all the scabs on the job.

We have now resumed and escalated our campaign against IP and its allies. First, we have been establishing strong links among all IP unionized workers and developing a joint strategy with those Locals that are still working.

We are also taking advantage of a recent Supreme Court ruling that for the first time allows unions to organize boycotts of the products and services of a company linked to the primary employer.

Our first step has been to announce a full-scale boycott of Bank of Boston Corp. and its various subsidiaries: First National Bank of Boston, Casco Northern Bank of Maine, Rhode Island Hospital Trust, and Bank of Boston Connecticut.

By supporting IP, Bank of Boston is helping to promote union-busting in New England. One of the most ominous aspects of the IP strike in Jay was the company's move to bring in BE&K, the professional strikebreaking outfit based in Alabama. BE&K, which has been working to undermine building trades unions in other parts of the country, has now established a presence in New England. If BE&K is not stopped, it will undoubtedly start carrying out its anti-union agenda here as well.

Bank of Boston is an important target not only because of its links to IP's irresponsible labor and environmental policies. It is also closely tied to the Liberty Mutual Insurance Co., which led the insurance industry's successful drive to weaken the Workers Compensation law in Maine.

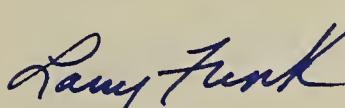
Bank of Boston is clearly part of a coalition of powerful institutions that are seeking to undermine the labor movement. Just as Bank of Boston throws its weight around, so must we use our collective pressure to get the company to clean up its act and end its support of IP's disastrous policies.

We therefore urge you to do the following:

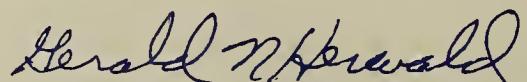
1. Please withdraw all personal and organizational deposits and refrain from doing other business with Bank of Boston and its subsidiaries.
2. Please write to Bank of Boston management informing them of the reasons for your action. Please send copies of your letters (and, if you are willing, the amount of money withdrawn) to:
Bank of Boston Boycott
UPIU Local 14
P.O. Box 272
Jay, Maine 04239
3. Help spread word of the boycott by distributing copies of the enclosed leaflets and boycott pledge cards. You may order more copies by writing to Local 14 at the address above or calling (207) 897-5423. You may also call our Boston Coordinator, Rand Wilson, at (617) 482-6878.
4. Join us in informational leafleting of bank branches. Contact Local 14 or Rand Wilson to discuss how you can get more involved.

Thank you in advance for your support.

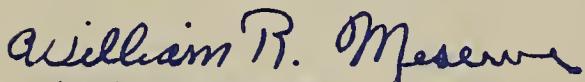
In solidarity,



Larry Funk
Chairman, Jt. Nego. Comm.
Mobile, Alabama



Gerald Herwald
Local President
De Pere, Wisconsin



William Meserve
Local President
Jay, Maine

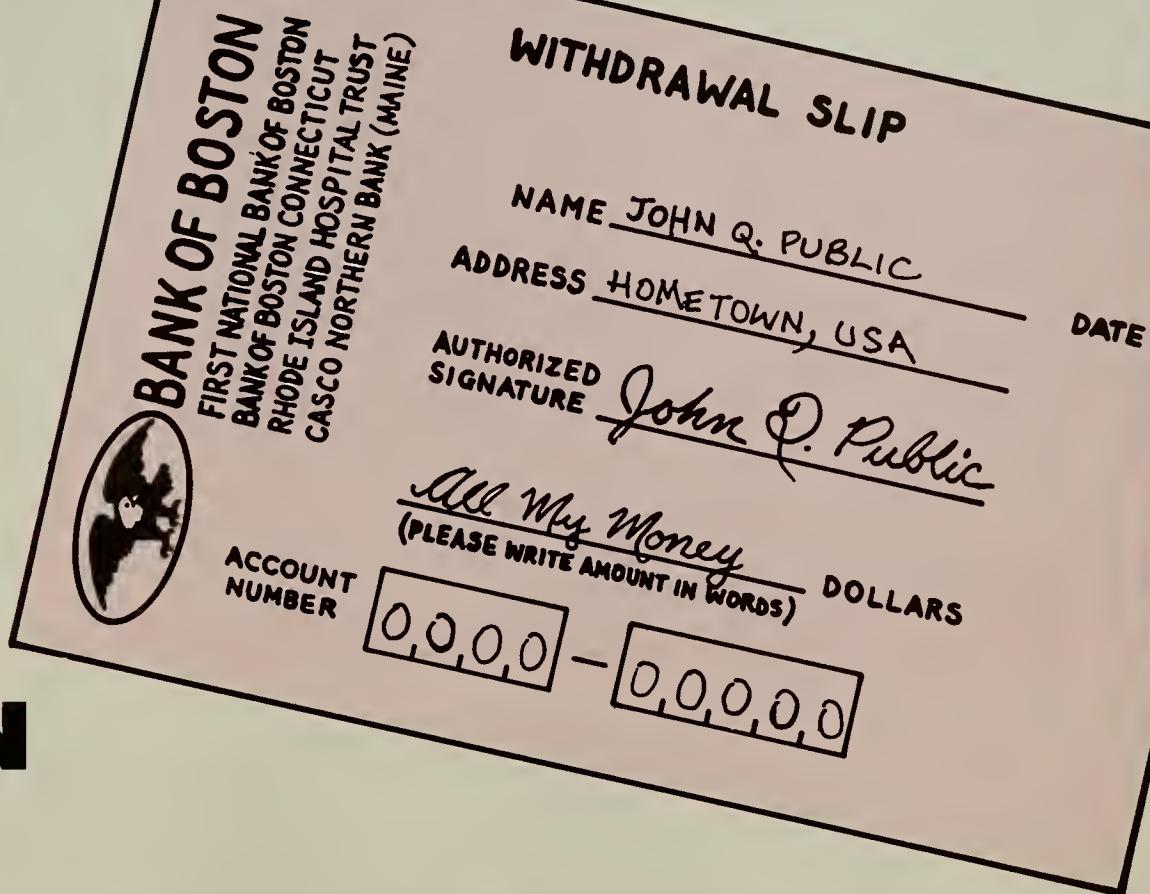


Robert McKiverson
Local President
Lock Haven, Pennsylvania



**Striking
paperworkers
say:**

DON'T BANK WITH BANK OF BOSTON



Bank of Boston is directly linked to International Paper Co., the highly profitable papermaker that has had 3,500 workers in four mills locked out or on strike for a year or more.

The union workers refused to accept massive wage givebacks and work-rule changes that would make already dangerous jobs much more hazardous. So, the paper company immediately replaced them with strikebreakers. Then it introduced an atmosphere of military occupation around the mills, complete with surveillance cameras and 10-ft.-high barbed-wire fences.

Sitting on International Paper's board is top Bank of Boston policymaker Donald McHenry. Through his position McHenry is directly tied to IP's brutal labor policies that have brought great hardship to the milltowns of Jay, Maine, Lock Haven, Penn., De Pere, Wis., and Mobile, Ala. In addition to the economic devastation, IP's use of inexperienced strikebreakers was followed by several dangerous chemical leaks in Jay – one of which nearly created a situation

like that in Bhopal, India (where 2,500 people died) and required the evacuation of over half the town.

Bank of Boston and IP represent a coalition that has declared war on the public. Together, they are using their collective economic and political power to tear apart communities and destroy the lives of workers who have given up to 40 years of service.

Right now, they are drawing their strength from other people's money. The only way for the public to challenge their abuses is to demonstrate our own collective economic power. We can do this by closing our accounts and by looking elsewhere for loans and other banking services.

Boycott Bank of Boston and its subsidiaries. Bank of Boston must either dump Donald McHenry from its board or else McHenry must resign from the IP board to protest IP's labor policies.

PLEASE INFORM THE BANK IN WRITING OF YOUR INTENTION TO STOP DOING BUSINESS WITH THEM BECAUSE OF THEIR SUPPORT FOR INTERNATIONAL PAPER.

Write to... Board of Directors, Bank of Boston Corp., 100 Federal St., Boston, MA 02110, (617) 434-2200

BANK OF BOSTON INCLUDES: First National Bank of Boston, Bank of Boston Connecticut, Rhode Island Hospital Trust, Casco Northern Bank (Maine)

Please send copies of any correspondence you have with the bank and, if you wish, the amount of money withdrawn to: United Paperworkers Corporate Campaign, UPIU Local 14, AFL-CIO, P.O. Box 272, Jay, ME 04239.

BOYCOTT BANK OF BOSTON:

**First National Bank of Boston
Casco Northern Bank of Maine
Rhode Island Hospital Trust
Bank of Boston Connecticut**

Board of Directors
Bank of Boston Corp.
100 Federal Street
Boston, MA 02110

This to inform you that I have pledged to boycott all of your bank's services (including those of your subsidiaries First National Bank of Boston, Bank of Boston Connecticut, Casco Northern Bank of Maine and Rhode Island Hospital Trust) to protest Bank of Boston's tie to International Paper Co. (IP) and its unfair labor policies. As you know, your board member Donald McHenry is also on the board of directors of IP.

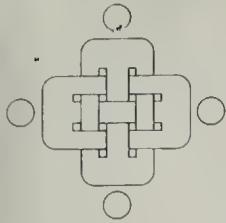
I am troubled about Bank of Boston's connection to a company that has shown contempt for its employees by locking out or forcing on strike 3,500 workers and bringing in strikebreakers to replace them. IP's policies are tearing apart families and whole communities.

As long as Donald McHenry is on your board of directors, I cannot bring myself to support your company. You should know that I will also be urging my relatives and friends to join this boycott of your services.

Name_____

Address_____

City_____ State_____ Zip_____



Massachusetts Health Data Consortium, Inc.

400-1 Totten Pond Road • Waltham, MA 02154 • 617 890-6040

ET OFF.

Frederick W. Ackroyd, M.D.
President

Elliot M. Stone
Executive Director

MEMBERS:

PROVIDERS

Massachusetts Hospital Association
Massachusetts Federation of Nursing Homes
Massachusetts Medical Society
Mass. Association of Community Health Agencies
Massachusetts Nurses Association

STATE GOVERNMENT

Board of Registration in Medicine
Department of Public Welfare
Office of Health Policy, EOHS

PLANNING AGENCIES

Central Massachusetts Health Systems Agency
Health Planning Council for Greater Boston
Northeast Health Planning Council
Western Massachusetts Health Planning Council
Southeastern Massachusetts Health Planning and Development Council, Inc.
Massachusetts Statewide Health Coordinating Council

PRO

Mass. Peer Review Organization, Inc.

INSURERS

Blue Cross Blue Shield of Massachusetts
Health Insurance Association of America

HMO

Massachusetts Association of HMOs

BUSINESS

Massachusetts Business Roundtable

PAST PRESIDENTS:

Paul M. Densen, D.Sc.
Francis D. Moore, M.D.

June 17, 1988

Mr. Arthur Osborne
President
Mass. AFL/CIO
3 Beacon Street
Boston, MA 02108

Dear Mr. Osborne:

In September, the Consortium will begin its eleventh year. Our Board of Directors has asked me to renew its invitation for the Mass. AFL/CIO to become one of our members. It is vital to us that the Consortium's membership maintain a balance among the needs and concerns of consumers, providers and purchasers of health care.

For 1988/89 we will begin the "Mass. Health Care Economy project" -- a collaborative effort with Simmons College. The Project will undertake several specific activities:

- Reports on the supply, composition and distribution of nurses, physicians and other health care personnel. The first survey, of 3,000 nurses entering the profession in July, will gauge their attitudes toward the profession and provide insight on the shortage issue.
- Evaluation of the impact of the Universal Health Care Act.
- Reports on concentration and competition in health insurance markets.
- Development of economic indicators to facilitate comparisons between the Massachusetts health care experience and the nation in general.

Mr. Arthur Osborne
June 17, 1988
Page Two

The Mass. AFL/CIO would also have access to all Hospital Utilization Reports since 1978 for the residents of each city, town and urban neighborhood as well as for each hospital in Massachusetts.

The Consortium would collaborate with the Mass. AFL/CIO on conferences such as our Health Policy Series. An invitation is attached for you to attend on June 24th as my guest.

Your membership fee would also be used as a match to leverage large foundation grants to study areas of common interest, such as our series of publications on "Groups-At-Risk", funded by the Boston Foundation and the Fidelity Foundation.

The Consortium's annual membership fee of \$6,000 has not changed since 1978.

I will call you next week to follow-up and to seek your advice on the data needs of the Mass. AFL/CIO. If you want to have a role in shaping the information used for public policy, please consider a Consortium membership.

The Board of Directors will hold their Fall meeting on October 18, 1988. Please let me know if you would like to attend or send an observer.

Thank you for your interest in our activities.

Sincerely,



Elliot M. Stone
Executive Director

cc: Nancy Mills
Frederick Ackroyd, M.D., President
Leon White, Treasurer

Attachment

EX OFFICIO

C.O.P.E. RETIREE PROGRAM

MASSACHUSETTS AFL-CIO
3RD CONGRESSIONAL DISTRICT

President
JAMES LAVIN
16 Eureka St.
752-1758

Ex. Vice-President
JOSEPH T. DYER
10 Edgemere Rd.
Shrewsbury, Mass.
755-6790

Secretary
HARLEY K. MORROW
10 Tirrell St.
755-5116

Treasurer
THOMAS F. AHERN
9 Diamond St.
754-1498

Vice-Presidents
STANLEY G. GNIADEK
791-3590

May 19, 1988

WARREN E. HOULE
754-9500

Dear Union Friend:

HELEN M. JARZOBSKI
842-0486

The C.O.P.E. Retiree Program of the 3rd Congressional District of Massachusetts, AFL - CIO will hold a second reunion party on Friday, evening July 1, 1988 at 7:00PM at the Main South American Legion Post, 1023 Main St., Worcester, Massachusetts. The price of admission is \$12.50 per person - ENTERTAINMENT - FOOD - DANCING - PRIZES.

EDDIE F. O'LEARY
753-1710

MARION T. SHAPIRO
842-3419

JOSEPH F. TIERNEY
756-9734

RAYMOND E. WHITNEY
753-3203

ARTHUR R. OSBORN
President, Mass. AFL-CIO
8 Beacon St., Boston, Mass.
227-8260

State Co-ordinator
KENNETH J. MANGAN
48 Grafton St.
Shrewsbury, Mass.
842-8444

The AFL - CIO, C.O.P.E. Retiree Program provides the structure and activities for former union members to maintain their ties to the union movement. We want to elect good candidates and the right candidates, and any future proposals to benefit elderly americans will get on the books only with the election of the right candidates. Our big objective in 1988 is to retain the prevailing wage and elect our friends. That makes our program one of the most important activities for Union Retirees going and we are progressing towards becoming the strongest retiree group in Massachusetts. Be there July 1st and meet old friends and new ones. Make checks payable to C.O.P.E. Retiree Reunion Party and forward to Harley K. Morrow, 1294 Main St., Worcester, Ma. 01603.

Franternally,
Joe Dyer
Harley Morrow
Eddie O'Leary

Tom (Spike) Ahern
Kenny Mangan
Ray Whitney

Warren Houle
Joe Tierney
Helen Jarzobski

Marion Shapiro



USO COUNCIL OF NEW ENGLAND, INC.

U.S. Coast Guard Support Center
4th Deck, Building #4
427 Commercial Street
Boston, MA 02109-1027 Tel: (617) 720-4949



Mr. Arthur R. Osborn
President Mass Afl-Cio
8 Beacon Street
Boston, MA 02108

Dear Mr. Osborn:

Two types of liberty will be celebrated here in Boston on the 4th of July: the liberty that countless generations and millions of servicemen have fought to preserve over two centuries . . . and the liberty to be enjoyed by hundreds of servicemen from five ships.

This means a busy time for the USC . . . providing facilities, solving problems, extending a welcome on your behalf as a citizen of the Commonwealth.

For 47 years, the USC has been a "Home Away from Home" for millions of armed forces personnel and their families. A new generation of young men and women have come to know the USO as their parents before them did.

As a key transportation center, Boston serves both our military and naval personnel -- all requiring twenty-four hour check cashing, emergency contacts with loved ones, holiday hospitality, and local guidance.

USO is funded by friends who once knew what it was like to be alone in a new port or military base. The generations change but the action is the same: servicemen and women head for the USC.

USO needs your support to serve those who serve you. A gift of \$15, \$25, \$50 or more helps pay for our ongoing services. Today, with hopes of peace dominating the news, it is easy to forget those who help insure a Fourth of July every year. Please help with your gift!

Sincerely,

James J. McAllister
James J. McAllister
President

JJM/j



UNITED SERVICE
ORGANIZATIONS, INC.

EX-OFFICIO

USO COUNCIL OF NEW ENGLAND, INC.

U.S. Coast Guard Support Center

4th Deck, Building #4

427 Commercial Street

Boston, MA 02109-1027 Tel: (617) 720-4949



Mr. Arthur R. Osborn
President Mass Afl-Cio
8 Beacon Street
Boston, MA 02108

Here is my gift to support the USO:

() \$15 () \$25 () \$50 () \$...

005405725-885201



Maureen A. Bisognano
Administrator
Massachusetts Respiratory Hospital
2001 Washington Street
Braintree, MA 02184

R

ichard H. Overholt, M.D. is a member of the Massachusetts Respiratory Hospital (MRH) Board of Trustees.

He has been a member of the medical staff at MRH and is on the staff of both New England Baptist and New England Deaconess Hospitals. He was also a Clinical Professor of Surgery at Tufts University School of Medicine. Dr. Overholt has been a non-smoking advocate since the 1930s, when he first recognized the dangers of smoking while performing chest surgery on patients at Massachusetts Respiratory Hospital.

Long before medical evidence substantiated his beliefs, Dr. Overholt began to speak to his colleagues about the health risks of smoking. His convictions were greeted with skepticism and in some cases, ridicule. Yet Dr. Overholt continued to spread the word, and through his perseverance, the anti-smoking movement was born.

Massachusetts Respiratory Hospital is honoring Dr. Overholt by focusing on the issue to which he has dedicated so much— preventing lung disease by advocating a smoke-free society. This tribute is a way to show our appreciation for his outstanding contributions, not only to MRH, but to the health of all people who hear his message.

R SVP

Name _____

Address _____

City _____ State _____ Zip Code _____

Will Attend _____ Will Not Attend _____

Will Bring A Guest _____

Guest Name _____

*The Board of Trustees
And the Administration of
Massachusetts Respiratory Hospital*

*Invite you to join us for a
Testimonial Reception*

*In Honor of
Richard H. Overholt, M.D.*

*Wednesday, August 17, 1988
3:00 P.M.*

*Massachusetts Respiratory Hospital
2001 Washington Street
Braintree, Massachusetts*

*Guest Speaker
Patrick Reynolds*

*Grandson of Tobacco Magnate R. J. Reynolds
And Non-smoking Advocate*

R.S.V.P. by August 8, 1988

Early Evening Buffet

• • •

*Massachusetts Respiratory Hospital is a smoke-free
facility. For the health and safety of our patients and
visitors, we ask guests to refrain from smoking
while on the grounds.*





DEMOCRATIC
SOCIALISTS OF
AMERICA

July 18, 1988

RE: LABOR DAY ISSUE OF DEMOCRATIC LEFT

Dear Friend:

Enclosed is a letter from Michael Harrington and Barbara Ehrenreich, Co-Chairs of Democratic Socialists of America, asking you to take out an ad in the Labor Day issue of **Democratic Left**. This ad campaign is the only fundraiser for **Democratic Left** which, we believe, provides a vital forum for a discussion of progressive issues. Published bi-monthly, **Democratic Left** reaches approximately 10,000 people with each issue.

As I'm sure you know, labor issues are prominent among the articles published in **Democratic Left**. We in the Boston Local have had an active labor support effort this year including work for the Harvard Union of Clerical and Technical Workers and the United Paperworkers International Union. Your ad in **Democratic Left** will contribute to our work in Boston because a small portion of ad revenues from Boston unions is returned to us.

Please consider a greeting in the Labor Day Issue of **Democratic Left**. Call us at the Boston DSA office if you have any questions.

In solidarity,

Ann Bachman for the
Boston DSA Executive Board



DEMOCRATIC SOCIALISTS
of AMERICA

June, 1988

15 Dutch Street, Suite 500
New York, N.Y. 10038-3705
(212) 962-0390

Dear Friend,

Co-Chairs

Barbara Ehrenreich
Michael Harrington

Vice Chairs

Harry Britt
Ronald Dellums
James Farmer
Dorothy Healey
Irving Howe
Frances Moore Lappé
Hilda Mason
Marjorie Phyne
Christine Riddiough
Rosemary Ruether
Edwin Vargas, Jr.
William Winpisinger

Organizational Director
Patrick Lacefield

*Field Director/
Anti-Racist Coordinator*
Shakoor Aljuwani

*Publications & Political
Education Director*
Sherri Levine

Staff
Barbara Farrow
Gary Lucek
Elissa McBride
Phil Steinberg

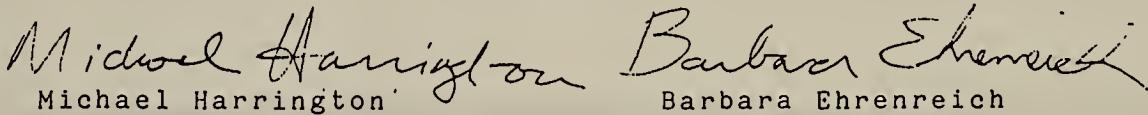
For our Labor Day issue of Democratic Left we are soliciting advertisements to accompany a special set of articles concerning labor in America and abroad. This is our most important issue of the year, in large part because it is a demonstration of support from valued friends and allies. We would like to ask you to consider joining with scores of unions, progressive organizations, and individuals in placing a greeting ad in this year's issue.

In the past year, DSA has worked with Party activists, the labor movement, and progressives to challenge those Democrats who would mimic Reagan and abandon constituents who have been the heart and soul of the Party. We will continue to work throughout the fall as part of this broad democratic left coalition, laying the groundwork for a progressive agenda we will advocate regardless of who wins the Presidency in November.

Organizing for an international conference to influence the debate around U.S. social policy is in the works for the spring of 1989. Our commissions have also been very busy; a religion and socialism Congress recently drew hundreds of activists to Chicago, and an upcoming socialist-feminist retreat is rejuvenating the feminist commission. Our Youth Section, which continues to be the largest and strongest radical youth organization in the country, will hold its 13th annual summer conference in August.

This ad campaign is our only effort to solicit funds for the journal. We hope you will choose to support our work by taking out an advertisement or greeting using the accompanying rate sheet/order form. Feel free to include logos, artwork, photos, etc. If possible, please provide the proper size camera-ready copy for the ad category you select. You may commemorate an event, advertise services or merchandise, honor a friend, quote a favorite passage, or simply call forth solidarity on Labor Day. Please respond by Friday, August 12. Thank you in advance for your support.

In Solidarity,


Michael Harrington Barbara Ehrenreich
Michael Harrington Barbara Ehrenreich



GREETINGS & ADS RATE SHEET ORDER FORM

We are devoting the Labor Day DEMOCRATIC LEFT to special articles and advertisements from those individuals and groups concerned with America's labor movement. This annual ad campaign aims to raise money for the journal, and provides an opportunity for you to join with unions, progressive organizations and spokespersons in supporting a new agenda for America's working people. We solicit both personal greetings and institutional advertisements.

Deadline: Friday, August 12, 1988. Make checks payable to Democratic Socialists of America (DSA), 15 Dutch Street, NY, NY 10038-3705. (Payment must accompany your order). For more information, call (212) 962-0390.

NAME: _____

ADDRESS: _____

ORGANIZATION: _____ PHONE: _____

MESSAGE/NAME (or attach camera-ready copy):

DISPLAY ADVERTISEMENTS

(circle one)
Color B & W

Full page, inside/back covers (7"w x 10"h)	\$1300	\$1200
Full page (7"w x 10"h)	\$1100	\$1000
Half page (7"w x 4 3/4"h)	\$550	\$500
Quarter page (3 1/2"w x 4 3/4"h)	\$300	\$250
Eighth page (3 1/2"w x 2 3/8"h)	\$150	\$125
Sixteenth page (3 1/2"w x 1 3/16"h)	\$75	\$65

PERSONAL MESSAGE/GREETING

RATE

Square box, 15 words	\$45
Name in boldface	\$30
Name only	\$20

Ex. OFF.



June 30, 1988

Arthur Osborne
Massachusetts AFL-CIO
8 Beacon Street
Boston, MA 02202

Arthur
Dear Mr. Osborne:

It is 4th of July weekend, and for many the end of summer seems far away--for us it will come all too soon! We have already been working on the Fourth Annual Bread & Roses Labor Day Heritage Festival for months. Last year's Festival brought over 20,000 people downtown and, as evidenced by the enclosed letter from Rhode Island, improved our community's image in the minds of people throughout New England. I am writing to you today to ask that Massachusetts AFL-CIO become a Festival contributor.

We plan to make this year's Festival better than ever. I am particularly pleased that the activities for children and families will increase in number and quality. The economic potential of Greater Lawrence and the entire Merrimack Valley depends on the quality of life provided to the workers of area companies. What better investment in the satisfaction of your employees than a free festival of national quality on the holiday set aside as a tribute to the American worker?

I would suggest you consider a contribution of \$1000. Such a contribution will provide Massachusetts AFL-CIO significant visibility at the festival with a 1/5 page acknowledgement in the program book.

Last year we produced not one but two major events. For the first time the Merrimack Valley had its own New Year's Eve Celebration. As this event matures, we hope it too will become a unique event--that unlike celebrations in other cities, a visitor could come to downtown Lawrence and in one evening sample the holiday traditions of different eras, different parts of the country and different parts of the world.

Several corporations have mentioned that it would be easier to plan their contributions if they could give for both events at the same time. They also point out that this would improve the Committee's long term planning. So, enclosed you will also find a New Year's Eve proposal. The response form allows you to contribute to one or both events. To say thank you to those who contribute to both now, we offer full benefits at a 10% discount. I hope this option will meet your needs and ours!

Thank you for your time and consideration.

Sincerely,

John
John M. Corliss, Jr.
President

*We are looking forward to another
great festival and crowd!*

P.S. To help make it clear to your employees that you are providing for their enjoyment, we will supply you with a limited number of Festival "tickets" worth \$1.00 off on parking, New Year's Eve entry buttons or both!

1988 Bread & Roses Labor Day Heritage Festival Sponsor Acknowledgment Information

<u>Donation</u>	<u>Acknowledgment</u>
\$50 to \$99	The Contributor's name will appear on a single line in plain 10 point type in the "Contributors" section of the Program.
\$100 to \$249	The Donor's name will appear on a single line in bold 10 point type in the "Donors" section of the Festival Program.
\$250 to \$499	The Sponsor will be acknowledged as an International Folk Fair artist's Sponsor (in the artist's Festival Program biography) <u>and</u> the sponsor's name will appear on a single line in bold 10 point type in the " Sponsors " section of the Festival Program. Sponsor's will select the artist to be sponsored on a first-come-first-serve basis.
\$500 to \$1499	The Patron will be acknowledged in the Festival Program by way of a 2 inch by 5 inch (1/5 page) "Thank You" which will read " <i>For their generosity and support the Festival Committee would like to thank...</i> " with the remaining text, logo, etc. supplied by the donor <u>and</u> the donor will be acknowledged as an International Folk Fair artist's Patron (in the artist's Festival Program biography). The Festival Program will not contain ads and we will try to limit the 2 x 5 inch Thank You's to one per page.
\$1500 to \$2499	The Friend will be acknowledged in the Festival Program as sponsor of an International Folk Fair (afternoon) stage or workshop and will be allowed to place a banner on or adjacent to that stage or workshop <u>and</u> the Friend will be acknowledged in the Festival Program by way of a 2 inch by 5 inch (1/5 page) thank you. Friend's will select the stage or workshop to be sponsored on a first-come-first-serve basis.
\$2500 and up	The Angel's name will be included on the Pemberton Park (evening) stage banner, the Angel will be acknowledged as a Pemberton Park Concert artist's sponsor (in the artist's Festival Program biography) and the donor will be invited to introduce that artist <u>and</u> the donor will be acknowledged in the Festival Program by way of a 2 inch by 5 inch (1/5 page) thank you. Donor's will select the artist to be sponsored based on the amount donated. For any donation over \$5000 made <u>before August 1</u>, your name will also appear on all flyers and posters.

To help make it clear to your employees that you are providing for their enjoyment, we will supply you with Festival "tickets" worth \$1.00 off on parking. They will be provided at a rate of one ticket for each \$4 contribution. Please indicate the number of tickets requested on the sponsors reply form.

1988 Holiday Traditions New Year's Eve Celebration Sponsor Acknowledgment Information

<u>Donation</u>	<u>Acknowledgment</u>
\$50 to \$99	The Contributor's name will appear on a single line in plain 10 point type in the " Contributors " section of the Celebration Program.
\$100 to \$249	The Donor's name will appear on a single line in bold 10 point type in the " Donors " section of the Celebration Program.
\$250 to \$499	The Sponsor will be acknowledged as a Holiday Traditions artist's Sponsor (in the artist's Celebration Program biography) <u>and</u> the sponsor's name will appear on a single line in bold 10 point type in the " Sponsors " section of the Celebration Program. Sponsor's will select the artist to be sponsored on a first-come-first-serve basis.
\$500 to \$1499	The Patron will be acknowledged in the Celebration Program by way of a 2 inch by 5 inch (1/5 page) "Thank You" which will read " <i>For their generosity and support the Celebration Committee would like to thank...</i> " with the remaining text, logo, etc. supplied by the donor <u>and</u> the donor will be acknowledged as a Holiday Traditions artist's Patron (in the artist's Celebration Program biography). The Celebration Program will not contain ads and we will try to limit the 2 x 5 inch Thank You's to one per page.
\$1500 to \$2499	The Friend will be acknowledged in the Celebration Program as sponsor of a Holiday Traditions stage or workshop and will be allowed to place a banner on or adjacent to that stage or workshop <u>and</u> the Friend will be acknowledged in the Celebration Program by way of a 2 inch by 5 inch (1/5 page) thank you. Friend's will select the stage or workshop to be sponsored on a first-come-first-serve basis.
\$2500 and up	The Angel's name will be included on the Finale stage banner, the Angel will be acknowledged as a Finale sponsor in the Celebration Program <u>and</u> the donor will be acknowledged in the Celebration Program by way of a 2 inch by 5 inch (1/5 page) thank you. For any donation over \$5000 made <u>before November 1</u>, your name will also appear on all flyers and posters.

To help make it clear to your employees that you are providing for their enjoyment, we will supply you with New Year's Eve entry buttons worth \$5.00. They will be provided at a rate of one button for each \$4 contribution. Please indicate the number of buttons requested on the sponsors reply form.

**Bread & Roses Heritage Committee, Inc.
1988 Program Sponsors Reply Form**

Name of Company _____
Address _____
City, State, Zip _____
Contact Person _____

<u>Donation</u>	<u>Type</u>	<u>Labor Day Festival</u>	<u>New Year's Eve</u>
\$50 to \$99	Contributor	_____	_____
\$100 to \$249	Donor	_____	_____
\$250 to \$499	Sponsor	_____	_____
\$500 to \$1499	Patron	_____	_____
\$1500 to \$2499	Friend	_____	_____
\$2500 and up	Angel	_____	_____
Tickets or buttons requested for each \$4 contributed.		_____	_____
Special 10% discount for duel sponsorship.		_____	_____
Total Amount Enclosed		_____	_____

**Make Checks payable to the Bread & Roses Heritage Committee, Inc. and
send to: 200 Common Street, Lawrence, MA 01840
Tax Exempt #04-2898483**

Fourth Annual Bread and Roses Labor Day Heritage Festival

A Proposal by the
Bread & Roses Heritage Committee
June 30, 1988

A multi-stage, multi-cultural festival celebrating greater Lawrence's proud labor heritage. The theme of this year's festival will be "The rising of the women is the rising of us all" from Bread & Roses, a song about the Lawrence Strike of 1912. A secondary theme will be the state's celebration of the 350th anniversary of black settlement in Massachusetts

Date/Time: Labor Day, September 5, 1988 from 10:00 AM to 10:00 PM

Location: Campagnone Common, Lawrence Heritage State Park Visitors' Center, Jackson Street, and Pemberton Park--all in downtown Lawrence, Massachusetts.

Co-organizers: City of Lawrence, Greater Lawrence/Haverhill Central Labor Council, Greater Lawrence Chamber of Commerce, Department of Environmental Management/Lawrence Heritage State Park

Support Organizations: Northeast Consortium of Colleges and Universities in Massachusetts, Lawrence Human Rights Commission, Folk Arts Network, Massachusetts Executive Office of Labor, Massachusetts Department of Labor and Industry, Massachusetts Council on Arts and Humanities, Lawrence Arts Lottery Council, The Arts and Cultural Commission of Methuen, and a variety of ethnic organizations.

Goals:

1. Celebrate Labor Day.
2. Enlighten people regarding Lawrence's major role in Labor History.
3. Provide a good family-oriented activity appealing to the people of Lawrence.
4. Increase understanding through the enjoyment of the folk arts of various cultures.
5. Increase local pride by presenting a quality program to the people of New England.
6. Attract people from Lawrence's suburbs to the downtown.
7. Improve Greater Lawrence's image in the minds of those living outside the area.

Program: The Labor Day Heritage Festival will include three distinct parts:

1. Procession/Opening (10:00-11:30AM): There will be a procession and reenactments of the dramatic 1912 "Senate Strike Hearings".
2. International Folk Arts Fair (11:30AM-4:00PM): The Fair will include performances, workshops, exhibits and activities. Artists will include, musicians, singers, dancers, storytellers, crafts people and many others. In keeping with our primary and secondary themes, women and black artists will be featured. There will be four themes areas woven together throughout the festival site:
 - Massachusetts Labor Fest--The focal point of the Festival, it will feature a Women's Music stage, labor and other topical music, art and information.
 - 3rd Annual North East Fiddler's Convention--To the music of many immigrant groups of the early 1900s, the fiddle was as prominent as the guitar is today.
 - Ethnic Heritage--Immigration to Lawrence did not stop in 1912, this area will provide recent immigrants with a place to display their traditional art forms.
 - Children's Area--Children played a very significant role in 1912. The children's program will seek to entertain and educate children of all ages.
3. Pemberton Park Music Festival (4:30-10:00PM): The day's activities will end where the first Bread & Roses Music Festival was held by the Lawrence Heritage State Park 4 years ago, along the banks of the Merrimack River.
 - Concert: The majority of the evening program will consist of a concert featuring six to eight performances by nationally, regional, and local artists.
 - Fireworks: The traditional Grand Finale of Labor Day in Lawrence is the Greater Lawrence/Haverhill Central Labor Council's fireworks.

Food

Food will be handled differently at the two major sites.

1. Campagnone Common (International Folk Fair): Local ethnic and civic organizations will, for a moderate fee, be allowed to set up food booths. (Organizations wishing to set up informational booths will also be assigned space for a small fee). "Beverages only" booths will be set up with proceeds going to the Committee.
2. Pemberton Park (evening concert) The focus of the evening will be foods produced in greater Lawrence and the Merrimack Valley and foods unique to or associated with greater Lawrence and the Merrimack Valley. Food booths will be set up mostly by professional vendors.

Audience:

Based on previous experience, 20 to 30 thousand people are expected to attend (over 20,000 attended last year). Peak participation of up to 15 thousand would be expected for the Pemberton Park evening concert and fireworks.

Accessibility:

The festival site is handicapped accessible and most performance signed for the hearing impaired.

Marketing:

As in past years, a full promotional campaign will be designed and implemented. The general coverage area will include most of New England. The major focus of the campaign will be The Merrimack Valley, Greater Boston, and Southern New Hampshire. Media outlets to be emphasized include the Boston Globe, the Lawrence Eagle-Tribune, WGBH (Public Radio, Boston), WERS (Emerson College Radio, Boston), WCCM/WCGY (Lawrence), and Continental Cablevision (Lawrence). There will also be a targeted campaign promoting appropriate participating artists through ethnic newspapers/newsletters, church newsletter/bulletins, radio and TV programs. Finally, the promotional campaign will include banners and posters, and direct mail to carefully selected groups and individuals.

Admission:

Admission to all events will be free. Attended parking will cost \$3.00.

Security:

Security will be provided by the Lawrence Police Department and Auxilliary and by the Department of Environmental Management Police. Due to the nature of the acts booked and since there will once again be no acoholic beverages sold, we expect no problems (police have reported no problems at previous festivals).

Budget:Expenses*

Professional Services

Artist Fees	\$27,000
Production Services	9,700
Other	<u>7,300</u>
Subtotal	\$44,000

Marketing	6,500
-----------	-------

Operating Expense	25,200
Total Expenses	\$75,600

Revenues

Vendors Fees/Sales/Parking	\$7,500
----------------------------	---------

Corporate/Business/Foundation Contributions	45,600
---	--------

Mass. Council on the Arts & Humanities/Arts Lottery	17,500
---	--------

City of Lawrence	5,000
Total Revenues	\$75,600

* Assumes that, as in past years, another \$30,000 in in-kind contributions of goods, hours of volunteer effort, and services will be forthcoming.

An Immigrant City New Year's Eve Celebration

A Proposal by the
Bread & Roses Heritage Committee
June 30, 1988

A sharing of the holiday traditions of different eras, different parts of the country and different nations of the world in a six hour, over twelve site extravaganza.

Date/Time: December 31, 1988 from 6:00 PM to 12:00 Midnight

Location: Events will be held in Churches and other Public Buildings around the Campagnone Common (a minimum of 12 buildings some with multiple performance sites--all in downtown Lawrence) and on the Common itself..

Support Organizations: City of Lawrence, Council of Churches, Lawrence Association of Social Organizations, Centro Pan-American, Greater Lawrence Chamber of Commerce, Greater Lawrence/Haverhill Central Labor Union Council, Lawrence Heritage State Park, Lawrence Central Business District Association, Main Street Program, Lawrence Human Rights Commission, International Institute, Mass. Council on Arts and Humanities, New England Foundation for the Arts, Methuen Arts and Cultural Commission and Lawrence Arts Lottery Council.

Goals:

1. Celebrate the Holiday Season.
2. Provide a good family-oriented activity.
3. Increase understanding through the enjoyment of various cultural traditions.
4. Increase local pride by presenting a quality program for the people of the region.
5. Attract people from Lawrence's suburbs to the downtown.
6. Improve Greater Lawrence's image in the minds of those living outside the area.

Program: The Immigrant City New Year's Eve Celebration will have three distinct parts:

1. A Costume Parade (6:00-6:30 PM): Organizations will be invited to compete for prizes in a costume parade. Groups may wear traditional costumes or amusing costumes selected specifically for this event. There will be adult and childrens divisions.
2. A World of Traditions (6:30-11:30 PM): The Committee will seek to recruit Social and Ethnic organizations to present 30, 60 or 90 minute programs representative of Holiday Traditions during a specific era and in a specific place in this country or in some other land. Events may include plays, musical or dance performances, dancing, sing-a-longs, exhibits, etc. A mix of activities for Adults, Families and Children will be scheduled throughout the evening (in 1987 a large number of families participated right up until midnight). The Committee will supplement the organization presented events as needed. Participants will have approximately 50 activities to choose from over the course of the evening.
3. Laser Light Finale (11:30-12:00 AM): Using City hall as a backdrop, a spectacular multi-media laser light show will usher in the New Year in grande style.

Food: Ethnic and social organizations, will for a moderate fee, be allowed to set up food booths in one of several locations (including outside if they so desire). The main food area will be in the High School Cafeteria.

Audience: Attendance will be affected by the weather. Based on last years attendance, approximately ten thousand people will participate. Many participants will receive buttons from corporate contributors and some will come only for the free outdoor events--we expect to sell over 3,000 buttons to individuals.

Accessibility: Efforts will be made to make as many sites as possible handicapped accessible (many of these are very old buildings) and, if appropriate, performances will be signed for the hearing impaired.

Marketing:	A full promotional campaign will be designed and implemented. Since Boston, MA; Worcester, MA; Portsmouth, NH; and Concord, NH will all be holding First Night Celebrations on December 31st, the major focus of the campaign will be the Merrimack Valley, the North Shore and Southern New Hampshire. The media list developed by the Bread & Roses Heritage Committee will be used for this program. There will also be a targeted campaign promoting appropriate participating artists through ethnic newspapers/newsletters, church newsletters/bulletins and radio and TV programs. Finally, the promotional campaign will include banners and posters, and direct mail to carefully selected groups and individuals. First Night is a celebration of arts and artists. An Immigrant City New Year's Eve is a celebration of people and their holiday traditions. The difference between An Immigrant City New Year's Eve and First Night will be highlighted in the promotional campaign.																												
Admission:	\$5.00 for entrance to any and all in-door events; outdoor events free.																												
Security:	Security will be provided by the Lawrence Police Department and Auxiliary and by paid security guards. Due to the nature of the celebration and since there will once again be no alcoholic beverages sold, we expect no problems (police have reported no problems at any Bread & Roses Heritage Committee produced event).																												
Budget:	<p><u>Expenses*</u></p> <table> <tr> <td>Professional Services</td> <td></td> </tr> <tr> <td> Artist Fees</td> <td>\$28,000</td> </tr> <tr> <td> Production Services</td> <td>9,900</td> </tr> <tr> <td> Other</td> <td><u>7,500</u></td> </tr> <tr> <td> Subtotal</td> <td>\$45,400</td> </tr> <tr> <td>Marketing</td> <td>6,500</td> </tr> <tr> <td>Operating Expenses</td> <td><u>12,900</u></td> </tr> <tr> <td>Total Expenses</td> <td>\$64,700</td> </tr> </table> <p><u>Revenues</u></p> <table> <tr> <td>Admissions</td> <td>\$16,000</td> </tr> <tr> <td>Vendors Fees and Sales</td> <td>3,000</td> </tr> <tr> <td>Corporate/Business/Foundation Contributions</td> <td>30,200</td> </tr> <tr> <td>Mass. Council Arts & Humanities/Arts Lottery</td> <td>10,500</td> </tr> <tr> <td>City of Lawrence</td> <td><u>5,000</u></td> </tr> <tr> <td>Total Revenues</td> <td>\$64,700</td> </tr> </table>	Professional Services		Artist Fees	\$28,000	Production Services	9,900	Other	<u>7,500</u>	Subtotal	\$45,400	Marketing	6,500	Operating Expenses	<u>12,900</u>	Total Expenses	\$64,700	Admissions	\$16,000	Vendors Fees and Sales	3,000	Corporate/Business/Foundation Contributions	30,200	Mass. Council Arts & Humanities/Arts Lottery	10,500	City of Lawrence	<u>5,000</u>	Total Revenues	\$64,700
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* Assumes that, as in the past, another \$30,000 in in-kind contributions of goods, hours of volunteer effort, and services will be forthcoming.

Office of the Mayor, City of Lawrence, Massachusetts



Kevin J. Sullivan

MAYOR

June 23, 1988

TO WHOM IT MAY CONCERN:

The Bread and Roses Heritage Festival has been an inspiration to our city. The Festival is more than just a day of fun, music and celebration. It's a celebration of our city's proud history and promising future. It proves that this immigrant city can come together and enjoy the wide range of cultures that is our heritage. It's proof that the great diversity of our city can be a force that brings us together rather than divides us.

The festival committee would like to make the 1988 Festival even bigger and more exciting than the last three. This enthusiastic group of young Lawrencians has worked hard and sacrificed a lot to build a volunteer effort on this scale. They need your help to make this year's festival a reality, and I hope you will support them.

Sincerely,

Kevin J. Sullivan
Kevin J. Sullivan
Mayor

KJS:ev



LAWRENCE HUMAN RIGHTS COMMISSION

Lawrence Citizens: We Defend Your Rights

June 27, 1988

To whom it may concern;

It is my pleasure to write a letter in support of the Bread and Roses Heritage Committee's proposal for the Labor Day International Festival, 1988.

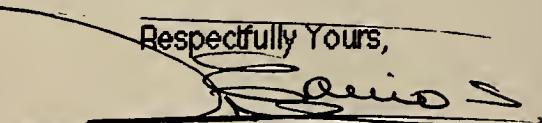
Since our inception we have worked closely with the Bread and Roses Heritage Committee, sharing their conviction that cultural activities can increase community pride and help bring about intercultural understanding and unity. The Bread and Roses strike of 1912 is an example of people of many cultures, speaking many languages, uniting to improve the quality of life not only in the city of Lawrence but throughout the nation with the labor movement that made children and women respected. It is an example which we feel is appropriate to follow today.

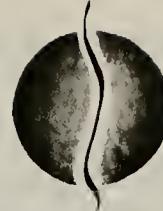
Our Human Rights Commission was born out of the riots of 1984, the reason for which we identify with the movement led by Bread and Roses. The city of Lawrence has confronted very negative incidents, but each time it has been able to develop positive solutions. The Labor Day International Festival for two consecutive years, has made a big change in people's mentality. It has brought a diverse ethnic community together and is considered as a social model, attracting more than 20,000 people to the festival where local talents perform side by side with national and international artists.

Bread and Roses is an example difficult to imitate. Our Commission is proud to have participated in the improvement of our social structure modifying attitudes and trying to eradicate prejudice against the ethnicity of our communities.

Our Human Rights Commission wholeheartedly endorses the proposal submitted to your Foundation by the Bread and Roses Heritage Committee. We hope you will give its proposal every possible consideration for funding, in order to continue the struggle against bigotry and prejudice that robs people of their dignity.

Respectfully Yours,


Guillermo Barrio
Executive Director



PROVIDENCE HEALTH PARTNERSHIP^{INC}

February 1, 1988

Mr. Lawrence R. Smith
Executive Vice President
Greater Lawrence
Chamber of Commerce
Lawrence, MA

Dear Mr. Smith:

Your organization and the businesses you represent have been on my mind since Labor Day, 1987. I was privileged to be in the audience for the Bread and Roses Festival.

The enormity of the undertaking and the quality of the presentations (during the day and into the night) were a joy to behold. But I write for a different reason.

I was surprised by the intensity of the good will I felt generated within me (and the four members of my family who joined me) during the festival. During the iconoclastic evening performance by the incomparable Utah Phillips, I marvelled at the good sense of the sponsoring businesses and the Chamber. I cannot imagine a better way to build community, enhance Lawrence's image, and advertise at the same time. What a joyous and solid demonstration of the strengths of American diversity!

I wish the Chamber, Lawrence as a city, and the Festival all the best in the future. I hope you become a model for communities throughout the country.

Sincerely,

Charles H. Rybeck, D.C.

cc: John Corliss, Jr.
Mayor Kevin Sullivan

Quotes about the Bread & Roses Labor Day Heritage Festival and Holiday Traditions New Year's Eve Celebration

It is thus refreshing to see how Lawrence is celebrating Labor Day this year. It is with fun and games to be sure. It is with good food and entertainment, that is true. But it is also with a very real awareness of the rich labor history that is Lawrence's Heritage.

Lawrence Eagle-Tribune, September 1, 1986, Editorial

The most impressive aspect was that the apparent ethnic makeup of the artists selected as performers was reflected, as best as I could determine, in the ethnic balance of the audience. I've been to dozens of events which really try for this kind of balance, but I have never been to one that came as close to succeeding as this festival did succeed. It was truly impressive.

Bill Nowlin, Rounder Records, Boston

The Spirit of Labor Day, kept both in the "Bread & Roses" theme and in the songs of labor, was enriched by the incorporation of the variety of other ethnic music and dance that was available. One could not help but be impressed by the ethnic diversity and the local talent that flourishes in Lawrence. How proud your city must be of its people!

Cheryl Cizewski, Manchester, NH

I...was delighted and moved by the gaiety, the sense of community, the political awareness and commitment...though mostly [by] the vitality, the diversity of the people and culture and values.

Carole Braverman, Phillips Academy, Andover, MA

So how does little Lawrence's one-day festival get to be in the top three with these two giants [the Newport and Philadelphia folk festivals]? By specializing in labor protest and immigration, the one major folk tradition native to Lawrence which the other two big festivals have failed to represent in recent years.

Ken Braiterman, Lawrence Eagle-Tribune, September 3, 1987

Lawrence should be commended for having such a celebration interpreted in American Sign Language...I hope Lawrence will continue to acknowledge the rights of the deaf community and other neighboring towns will follow its example.

Martha I. Scribner, Northeast Independent Living Center

I was surprised by the intensity of good will I felt generated within me (and the four members of my family who joined me) during the festival...I marvelled at the good sense of the sponsoring businesses...I cannot imagine a better way to build community, enhance Lawrence's image, and advertise at the same time. What a joyous and solid demonstration of the strengths of American diversity!

Charles H. Rybeck, D.C., Providence, RI

As you said and I quote you "...by understanding each other, we can appreciate each other." A philosophical statement that is greatly esteemed and, yes, it's linked to all people given body and soul in making this city a greater one.

Miguel E. Lopez, President, Ecuatorianos Unidos, Lawrence

I saw friends and acquaintances from Andover, Lawrence, Methuen and North Andover. People were shouting "Happy New Year" to each other and meaning it. Suburbanites said they didn't worry about being mugged because there were so many people on the streets having a good time.

Chris Young, Lawrence Eagle Tribune, January 7, 1988

The City of Lawrence has confronted negative incidents, but every time has been able to develop a very positive solution. The Labor Day Festival, for two consecutive years, has made a significant change in peoples mentality. It has brought a diverse community together and is considered a social model, attracting more than 20,000 people to a festival where local talents perform side by side with national and international artists.

Guilmo Barrio, Executive Director, Lawrence Human Rights Commission

A day to dance, sing, eat, look, listen

Festival celebrates the worker

Gloomy weather did not keep people from enjoying a host of folk and ethnic performers at the Bread and Roses Labor Day Festival.

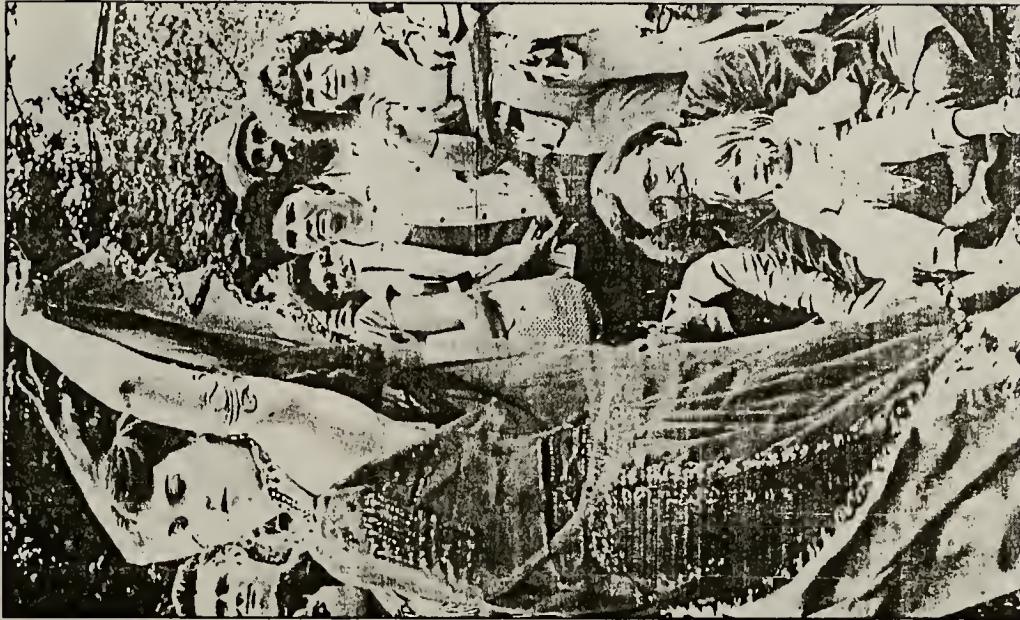
Puerto Rican, Cajun, Irish, Scottish, Polish, Middle Eastern and dragon dancers, fiddlers, storytellers and folk singers performed on six stages on Campagnone Common.

Scores of children acted out the homecoming of 1912 Bread and Roses strikers' children.

Families spread out their blankets and picnicked beside the river as Arlo Guthrie, Tom Paxton and others paid tribute to working people.



'You can get anything you want': Arlo Guthrie sings 'Alice's Restaurant' at Pemberton Park concert.



Middle Eastern dance: A belly dancer entertains a crowd on the common.

Lawrence's moment to shine

Lawrence plays host to 23,000

Festival From Page A1

ers carried, symbolizing they wanted more from life than bread and soup kitchens.

Shortly before noon, storyteller Judith Black reenacted a speech given by Elizabeth Gurley Flynn, a member of the I.W.W., the union that helped organized the strike.

Standing on the common, dressed in ankle length skirt and black shoes she shouted, "Today is March 30, 1912. Today we let bannisters fly. Today we sing in Greek, Arabic, Italian, for we have won. We have won our bread and roses. For it was better to starve fighting than to starve working."

Congressman Chester Atkins told the crowd gathered on the common that union struggles still exist.

Atkins cited the case of Friction Materials Corp. workers who he said voted in February to unionize and are awaiting certification from the National Labor Board.

Throughout the day thousands toured the Heritage State Park visitor's center, reading the history of immigrants who flocked here a century ago seeking work in the city's mills.

Some were unfamiliar with the 1912 strike. Others had relatives who endured ten-weeks without pay and relied on bread lines and soup kitchens to feed their families.

When asked what the Strike of 1912 was, 7-year-old Jeremy Marinkevich answered "I don't know."

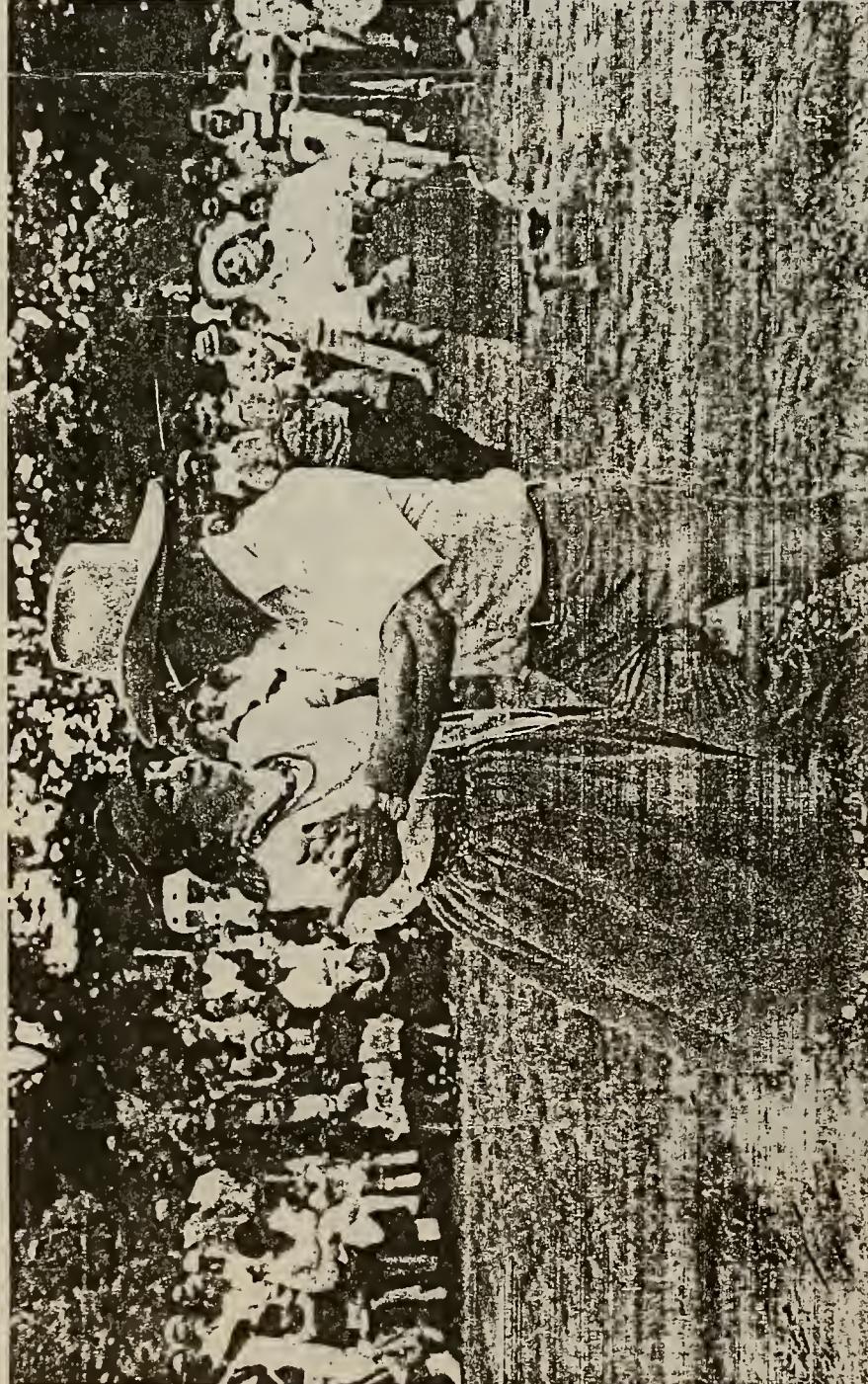
"That's when little kids like you had to leave the city," said his grandmother Rita Baillargeon, Hawley St., Lawrence.

"Why did they have to leave?" Jeremy, son of Karen and John Marinkevich, Monmouth St., Lawrence asked.

"Because it was too dangerous," Mrs. Baillargeon replied. "There was shooting in the streets."

"Oh, was that called World War I?" he asked.

Later in the day, thousands roamed Campagnone Common to sample a variety of ethnic music and food.



Eagle-Tribune Color Photo

Bread and Roses Festival: Samuel Winic, 58 Russet Lane, North Andover, learns Ecuadorean dance step.

23,000 recall 1912 strike in song, dance

By Barbara Walsh
Eagle-Tribune Writer

LAWRENCE — The Bread and Roses Festival began with dark skies and a sparse crowd. But before it was over, 23,000 had visited this city and more than half stayed to sing along with Arlo Guthrie and watch fireworks explode over the Merrimack River.

Alice's Restaurant."

"This is one of the greatest things that ever happened to Lawrence," said Carta, Railroad St., Methuen. "I think they ought to have one of these festivals every three months here."

The day celebrates the 75-year-old labor strike that shook the nation and

ended in victory for the city's 20,000 millworkers.

The millworkers rebelled Jan. 12, 1912 against a 31 cent pay cut after lawmakers ordered their workweek reduced from 56 to 54 hours.

The slogan "Bread and Roses" was adopted from a banner two women strikers

hosted at the working man and his battles, crowds lined up at the food tent to sample cajun chicken, ginger beer, spinach pie, kibbie, Lithuanian potato salad, and spicy sausages.

On one corner of the common, crowds watched Irish and Scottish step dancers reeled to fiddlers' music while on a nearby stage, belly dancers dropped veils to the Middle Eastern music.

"All of the cultures in the city are represented here and it's wonderful," said former Lawrence resident Trisha Zembruski. "Sometimes there's a racial tension in the city but when everyone gets together like this and shares their culture that tension softens."

Atkins cited the case of Friction Materials Corp. workers who he said voted in February to unionize and are awaiting certification from the National Labor Board.

Throughout the day, thousands toured the Heritage State Park visitor's center, reading the history of immigrants who flocked here a century ago seeking work in the city's mills.

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Please see FESTIVAL

Page A2



Eagle-Tribune Photos by Carl Russo

Grand finale: City Hall bathed in laser lights and falling sparklers.



Thousands gather: Watchers were rewarded by light show created by an expert from New York.

City's invitation

Come for New Year's, and 8,000 do

LAWRENCE — The Merrimack Valley's first-ever New Year's Eve celebration drew over 8,000 happy, excited people to the area surrounding Lawrence Common Thursday night.

Non-stop from 7:30 p.m. to midnight, they sang, danced, ate ethnic foods and ogled lights and pageantry in a spectacle never before attempted here.

It evidenced the months of effort put into it by John M. Coriiss Jr. and Mary Ellen Sullivan, coordinators, assisted by hundreds of community leaders and private citizens.

The extravaganza, run by project director Jack Powers and arranger Matthew Weiss had something for everybody.

Lilting Irish step-dancing music blended with a pulsating Bonzai beat; New Orleans jazz coexisted with tropical rock.

In the Lawrence High building alone, bluegrass competed with Mexican mariachi for attention.

Nearby, the classically-inclined had a choice of Baroque music, a string quartet, an organ recital or a singalong of Handel's "Messiah."

The children had enjoyed their

own free celebration from 2 to 5, but there were still several youngsters in the family groups enjoying the evening entertainment in 12 locations around the common.

They were up for everything from an ice skating rink to '40s music, to coffee houses, to poetry reading and a Nativity play in Spanish and English.

Whenever they worked up an appetite, they just crowded into Lawrence High cafeteria for a snack.

By 11 p.m., the party mood was nearing its peak, and revelers of all ages showed up at city hall to swell the local chorus in the finale.

It included a dazzling laser light spectacle, a video projection on City Hall in which the golden eagle appeared to take flight, and a 5,000-voice singalong backing the multi-media production.

This finale, sponsored by the Eagle-Tribune and Bank of Boston, was created by Jackson Madnick, professional designer and producer, assisted by associate producer Jane Hayes.

Madnick's specialty is allowing excited viewers to react personally to an abundance of visual and audio stimulation.



Wearing the button: Matthew Pearson, 6, wears button that got revelers into performances. He attended with his father, Richard, and sister Sarah, 8, all of 182 Berkley St., Methuen.

A \$5 button was the ticket to great night

Whatever you were doing New Year's Eve, I'll bet your didn't have more fun than I did.

I was in downtown Lawrence, in and around Campagnone Common, listening to a great jazz singer, an inspiring chamber group, watching a mariachi group serenade an older couple.

The first annual Immigrant City New Year's Eve celebration drew me because I was curious to see what the planning committee could produce in only three months.

Right away, I loved the sweet, celebratory spirit on the Common.

People were relaxed, friendly, comfortable.

I saw friends and acquaintances from Andover, Lawrence, Methuen and North Andover. People were shouting "Happy New Year" to each other and meaning it. Suburbanites said they didn't worry about being mugged because there were so many ordinary people on the streets having a good time.

And it was such a warm feeling to see little kids skating on the Common with their parents.

But it was the high quality and diversity of the performers that was the biggest surprise.

Ordinarily you would pay from \$8 to \$20 to hear or see artists of this quality.

At Immigrant City New Year's, a \$5 button allowed you to hear or see 20 or so singers, dancers, storytellers throughout the evening.

Henrietta Robinson, a sophisticated jazz singer from Boston was at the Lawrence Senior Center with her small combo. Smooth and elegant, singing both scat and Gershwin, she was my personal favorite. Although she had no trouble being heard, the hall at the senior center was too barny for this kind of singer. She deserved a more intimate atmosphere.

Intimate is what you would call the Hope Church hall. The Cavani



In Retrospect
Chris Young

Strings chamber group gave a delightful performance to a thoughtful crowd of about 50 people. The church hall was just right in terms of acoustics and comfort for this concert.

Two Easy, a jazz duo, charmed a comfortable group at the YWCA on Lawrence Street where the audience could sit at little tables and drink international coffees and eat pastries.

The Rambling Rovers, a three-man Irish singing group had a harder time being heard at the YMCA next door. The hard, metal angles of the gym where they were performing caused their haunting Celtic sound to reverberate and distort.

I enjoyed the Mexican Mariachis at Lawrence High cafeteria where a big crowd gathered to sample fish chowder, chili, hot dogs and hamburgers.

And although they got a late start, the Puerto Rican Parrandas band at Grace Church made wonderful Latin sounds.

Friends who attended gave rave reviews to: Irish folk singer, Robbie O'Connell at the high school auditorium, Baroque music at City Hall, Robert Frost films and readings by Jack Powers at City Hall, dancing to recorded big band music at Oliver School.

The elaborate laser, audio and light show and sing-a-long at the finale at City Hall has people talking and wondering what the committee will do for an encore next year.

But it was the high quality of entertainment the four hours before midnight that put people in the mellow mood to enjoy the festive finale.

Editorial

Holiday fest was old-fashioned fun

SUMMARY: The New Year's Eve celebration in Lawrence deserves to be an annual event.

LAWRENCE BECAME A CITY of light New Year's Eve.

The area's first New Year's Eve celebration attracted thousands of orderly, excited people. They partied from 7:30 p.m. to midnight, sampling ethnic foods, listening to rock bands, jazz, classical music or watching Irish step-dancing. More meditative celebrants listened to poetry readings or watched a bilingual Nativity play. There was something for every mood.

A few scenes stuck out:

□ In the Oliver School, revelers enjoyed music from a swing band. Even the janitors danced. The young folks couldn't keep up with the elderly set, who taught anyone under retirement age a lesson or two about real ballroom dancing.

□ Toward midnight, Hispanics and whites were joining hands and dancing to a Latino beat on the Common.

□ Everywhere, strangers greeted strangers with smiles, jokes and New Year's salutations. There was no noticeable drunken or disorderly conduct.

□ The laser show was not only spectacular, it exhibited a sense of humor. Not only did the eagle atop City Hall appear to take flight, it cawed to the strains of "This land is your land."

People, in short, had a great time. But they also had a simple time. First Night in Lawrence was good, old fashioned fun, marked by friendliness and fellowship rather than self-conscious sophistication.

The lion's share of the credit goes to John Corliss, Jr. and Mary Ellen Sullivan, the mayor's wife, who worked hundreds of hours to make New Year's Eve an unforgettable experience. Thanks go to an army of volunteers who helped them.

This deserves to be an annual event in Lawrence. We hope that next year it will be just as successful.

The Labor Council for Latin American Advancement

Cordially invites you to attend the

SEVENTH NATIONAL MEMBERSHIP MEETING DINNER-DANCE

to be held on

August 27, 1988 6:30 P.M.

AT THE HYATTS REGENCY HOTEL

123 Losoya Street, San Antonio, Texas 78205

LCLAA

R.S.V.P. 815 16th St., N.W., Suite 707
(202) 347-4223 Washington, D.C. 20006



**LABOR COUNCIL FOR LATIN AMERICAN ADVANCEMENT
SEVENTH NATIONAL MEMBERSHIP MEETING
DINNER-DANCE**

August 27, 1988 6:30 P.M.

Hyatt Regency Hotel, San Antonio, Texas

Please reserve _____ tables at \$500 each _____ tickets at \$50 each

Enclosed is \$ _____ (Treasury Funds Acceptable)

I cannot attend but want to make a contribution of \$_____

Name _____

Organization

Address _____

Make checks payable to LCLAA, 815 16th St., N.W., Washington, D.C. • (202) 347-4223





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BARNEY WALSH
MANNY WILLIAMS

Polled Executive Officers by phone on July 20, 1988

MMS to endorse the organization called City Year. This organization is similar to the Peace Corp. - Joe Joyce is involved. They want a couple of hundred dollars for flyers.

So voted.

Bob have we endorsed

Ex Officio

City Year
120 Tremont Street
Suite 201
Boston, MA 02108

June 11, 1988

Mr. Arthur Osborn
President
Massachusetts AFL-CIO
8 Beacon Street, 3rd Floor
Boston, MA 02108

Dear Arthur:

I have enclosed for your review a proposal for City Year For A Day, which we are very interested in having the Mass. AFL-CIO co-sponsor. As we discussed, we are very interested in working closely with you and feel that City Year For A Day presents an ideal opportunity. With the AFL-CIO as co-sponsor, City Year For A Day could well be the most important, productive and visible project that we do all summer. We are hoping to get Governor Dukakis or Mayor Flynn to kick it off.

I have also passed along a copy of this proposal to John Simmons and Joe Nigro, with whom I met last week. They are going to present it to their members in the next week or so.

We opened the program last Wednesday and were very excited to have Mayor Flynn join us. We also very much appreciated having Joe Joyce there and the very kind words that he said. In fact, Mike's parents thought that he was the best speaker. So far everything is going really well and the corpsmembers are already doing some great work.

Thanks again for your interest and support. I am very interested to hear what you think of the City Year For A Day proposal and hope to talk with you soon.

Sincerely,



Alan Khazei

The Boston Globe

THURSDAY, JULY 7, 1988

Neighborhoods



City Year members wash graffiti off a wall at the Mt. Pleasant Tot Lot in Roxbury yesterday.

Globe staff photo/David L. Ryan

Volunteer job corps rolls up sleeves for work

Helping the handicapped and homeless will be two goals for privately funded community group

By Frances Robles
Contributing Reporter

The peace corps came to Boston yesterday.

Not the Peace Corps that has worked for years in Third World countries, but Boston's City Year program, a privately funded community service project.

Mayor Flynn cut the ribbon yesterday morning at the Mt. Pleasant Tot Lot in Roxbury to celebrate the start of an eight-week program for 50 Boston people ages 17 to 21 to work in groups of 10 on community projects.

The projects include vacant lot renovation, Special Olympics training, needs assessment surveys, and work for the homeless. The tasks will be conducted by the City Year members, each receiving a stipend of \$60 a week, and a \$1,000 scholarship.

"We brought the peace corps to our own backyard," said Jennifer Eplett, City Year's development director. Boston is among about 30 cities nationwide to start such a project. Philadelphia, New York City,

and San Francisco are other cities with "urban peace corps."

The teams are composed mostly of Boston high school students from diverse backgrounds. "They are mostly high school students, but we have eight college students, as well as some high school dropouts," said Alan Khazei, City Year president.

"We wanted all sorts. Not just leaders, not just followers. 'A' students and 'D' students," said Neil Silverston, the program's director of finance and administration. "Mainly we looked for people with motivation."

"There are more important things than money," said Kim Eberhardt, 21, a Boston University student doing Special Olympics training. Eberhardt, of Birmingham, Ala., is looking forward to working with the handicapped.

Bain & Company, Bank of Boston, Equitable Financial Services and General Cinema each donated \$25,000 to City Year to sponsor a team. One team was made possible through citizen contributions.

"We liked the idea of private funding, it shows what the private sector can do," said Khazei. He said he started the project because he wanted to "show young people what they can do through public service."

Khazei hopes that this program will serve as a pilot for a full-year plan. "We started small to see how it would work," he said.

The team members, who were chosen from more than 150 applicants, just completed four days of training at Thompson's Island in Boston Harbor. Anna Reilly, head of the training program, has worked them hard.

"They had physical training, obstacle courses and training in race relations, and they cleared out an apple orchard," she said.

The teams will split up and start their respective projects. Starting tomorrow, the corps will start every day at 8 a.m. on Boston Common doing calisthenics to prepare for the day's work.

Telephone (617) 426-3000

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25 Cents

Wednesday July 6, 1988

50 work together to serve the Hub

By L. KIM TAN

A GROUP of youngsters who underwent four days of intensive group-oriented training on Thompson Island will put their new skills to work today on a variety of service projects around the Hub.

Following a send-off by Mayor Ray Flynn, the modern-day urban Peace Corps will begin tackling 15 assignments, most of them in Boston, that organizers say will benefit community residents and — more significantly — change the lives of the young workers.

"Our idea is to turn them on to the ideals of citizenship," said Alan Khazei, a Harvard Law School graduate who helped plant the seed for the program, City Year, last year.

Khazei and other City Year staff members had carefully selected 50 high school and college students, ages 17 through 21, for the 8½-week pilot program, bringing together youngsters from different racial, religious and socioeconomic backgrounds.

Intensive workshops and physical workouts over the last four days on Thompson Island focused on group effort and stressed individual respect, cooperation, friendship and service.

The result, as seen in changes in the students' behavior and interaction, has exceeded the program's basic goals, Khazei and other City Year staffers said proudly.



HELPING HANDS: Spencer Blasdale and Cathy Tong help teammate Doug Lewis over a 13-foot wall.

Staff photo by Johanna L. Torres

"One kid said he's finally learned that people can like him. That's a pretty amazing statement," Khazei said. "It's amazing some of the friendships that have been made already."

For Jack Lyons, a hearing-impaired student from South Boston, the program has helped him trust other young people.

"When I first arrived, I was nervous being with hearing people," the 18-year-old Horace Mann student said, smiling. "Now I'm just fine."

City Year participants are paid a stipend of \$60 a week and will receive a \$1,000 scholarship in the fall, Khazei said.

Sandra Barreiro, 18, a Mount Saint Joseph Academy student from Allston, said she'll earn less money this summer than many of her classmates. But her experience will be worth more "personal-wise than money-wise," she said.



Union Label & Service Trades Department AFL-CIO

815 SIXTEENTH STREET, N.W., WASHINGTON, D.C. 20006 (202) 628-2131



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June 1988

Greetings:

We have come a long way since those ancient times when there was no significant difference between workers and slaves. Today there are those who would still like to repress the working man and woman of their hard won gains by union busting, by opposing an increased minimum wage, watering down occupational, health and safety standards, wage and benefit concessions, relaxing "homework" laws, job closing with no notice to workers, weak enforcement on "dumping" regulations and condoning exploitation of children in foreign countries by greedy companies to gain higher profits.

However, we still enjoy a higher standard of living than any other country. Benefits American workers enjoy today engendered by organized labor include health and pension benefits, paid vacation, grievance procedure, social security, a 40-hour work week, child labor laws and a free public school system. There can be no free and democratic society where free and democratic unions do not exist!

The Department has expanded the celebration of Labor Day, a day to rejoice for the progress of freedom and dignity in the workplace, by developing Union Label Week. This is a week we highlight the accomplishments of the free American labor movement and emphasize the importance of buying the products we manufacture and patronizing the facilities we service.

This year, September 5 - 10, 1988, has been designated as Union Label Week. We have enclosed a packet containing suggested proclamations to be adopted by local and state government bodies, suggested public service announcements, graphics and an editorial, and planned activities. This information, along with the events your Union Label and Service Trades Council have scheduled, will generate an understanding and an awareness in your community as to the importance it is to buy American and look for the union label and how it affects each of us as individuals and the entire economy of the U. S.

Fraternally,

Sidney Heller
Secretary-Treasurer

JEM:eh
Enclosures
opeiu#2

EDITORIALEDITORIALEDITORIALWHAT IS LABOR DAY?

The first Labor Day was September 5, 1882, when 10,000 union men and women marched in New York in celebration of the significant gains they had made in the workplace. Labor Day was officially proclaimed a holiday in 1894 and is today celebrated by all Americans.

Labor Day is a day honoring our forebears in the labor movement who struggled and sacrificed so that all working Americans could enjoy dignity in the workplace and a standard of living unparalleled in the world.

Labor Day is a day to reflect so we don't lose sight of the achievements organized labor has won for all of us. Through its continuous and tireless efforts, we have the 40-hour work week, health and welfare benefits, paid vacations, child labor laws, social security, minimum wage, occupational safety and health laws and other social and economic reforms.

To further pay tribute to our forefathers and to our union brothers and sisters of today, September 5 - 10, 1988, has this year been proclaimed Union Label Week by the AFL-CIO and the Union Label and Service Trades Department, AFL-CIO. This is a week for everyone to make a commitment and a concentrated effort to look for the union label, shop card and service button. We in the labor movement are over 14 million members strong and that is a lot of purchasing power. Just think what an impression we could make if we all exercised that power to buy American made. To maintain our standard of living and keep America strong we have to stand together in solidarity -- buy what we make and patronize our organized services and facilities.

In Lee Iacocca's book he quotes a Dr. Tomio Kubo of Japan who said, "We in Japan look after our own self interests. What I don't understand is why your country doesn't do the same." And when India was placed under British regime and imports from Britain was putting Indians out of work, Gandhi said, "Burn all cloth from Manchester and Leeds. If you're left with one piece of homespun, wear it with dignity. There is no beauty in the finest cloth if it brings hunger and unhappiness."

So let us look for the union label, not just this designated week but every week and every day. Indeed, let us "take care of our own" and "wear our homespun with dignity."

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Sidney Heller, Secretary-Treasurer
Union Label & Service Trades Department, AFL-CIO
opeiu#2

10-SECOND RADIO SPOT

ANNOUNCER: THIS WEEK AMERICAN LABOR IS OBSERVING UNION LABEL WEEK. THE UNION LABEL ON A PRODUCT YOU BUY IS YOUR GUARANTEE THAT IT WAS MADE IN AMERICA. LOOK FOR IT!

20-SECOND RADIO SPOTS

ANNOUNCER: THIS WEEK THE AFL-CIO IS OBSERVING UNION LABEL WEEK. EACH YEAR, THIS NATIONWIDE EVENT HONORS THE EMBLEMS OF THE TRADE UNION MOVEMENT -- THE UNION LABEL, SHOP CARD, STORE CARD AND SERVICE BUTTON. WHEN YOU SEE THESE DISTINCTIVE EMBLEMS, YOU KNOW THAT THOSE GOODS AND SERVICES ARE MADE BY WORKING AMERICANS JUST LIKE YOU. WHEN YOU HELP AMERICAN WORKERS BY BUYING UNION-MADE, MADE IN U. S. A. PRODUCTS AND SERVICES, YOU ARE HELPING TO KEEP AMERICA'S ECONOMY STRONG AND HEALTHY -- AND THAT'S GOOD FOR YOU TOO!

* * * * *

ANNOUNCER: THIS WEEK IS AFL-CIO UNION LABEL WEEK. IT'S OBSERVED EACH YEAR TO REMIND YOU OF THE FINE PRODUCTS AND SERVICES PROVIDED BY THE MEN AND WOMEN OF ORGANIZED LABOR.

QUALITY PRODUCTS AND SERVICES ARE IDENTIFIED BY THE UNION LABELS, SHOP CARDS, STORE CARDS AND SERVICE BUTTONS OF AMERICA'S FREE TRADE UNIONS.

UNION MEMBERS ARE WORKING PEOPLE JUST LIKE YOU. YOU CAN HELP THEM AND HELP AMERICA AT THE SAME TIME BY ALWAYS BUYING THEIR PRODUCTS AND USING THEIR SERVICES. AND WHEN YOU HELP KEEP AMERICA'S ECONOMY STRONG AND WORKING -- THAT'S DOING YOU A FAVOR TOO!

(over)

30-SECOND RADIO SPOT

ANNOUNCER: THIS WEEK AMERICAN LABOR IS OBSERVING UNION LABEL WEEK. IT IS FITTING THAT THE PERIOD IMMEDIATELY FOLLOWING LABOR DAY BE SET ASIDE TO HONOR THE EMBLEMS OF THIS NATION'S SKILLED UNION MEN AND WOMEN -- THE UNION LABELS, SHOP CARDS AND SERVICE BUTTONS OF THE FREE TRADE UNIONS TO WHICH THEY BELONG.

THE UNION LABEL ON A PRODUCT YOU BUY, OR ON A SERVICE YOU PATRONIZE, IS AN ASSURANCE THAT THE PRODUCT OR SERVICE WAS PRODUCED UNDER GOOD WORKING CONDITIONS AND FOR A FAIR RATE OF PAY. IT IS YOUR ASSURANCE THAT THE PRODUCT OR SERVICE MEETS ANOTHER, MOST IMPORTANT CRITERION -- MADE IN AMERICA!

WHEN YOU LOOK FOR THE UNION LABEL, YOU ARE TAKING AN ACTIVE PART IN THE WAR AGAINST IMPORTS THAT ARE FLOODING OUR SHORES AND WHICH HAVE COST THE JOBS OF HUNDREDS OF THOUSANDS OF AMERICAN WORKERS -- YOUR NEIGHBORS. AMERICA'S ORGANIZED WORKERS ASK YOU TO LOOK FOR THE UNION LABEL!

SAMPLE PROCLAMATION

UNION LABEL WEEK

(Mayor or Governor)

WHEREAS, Organized labor has always led the fight to improve the lot of all American workers; and

WHEREAS, Labor organizations remain in the forefront of battles to protect consumer rights and secure justice and equality for all citizens; and

WHEREAS, Foreign goods are invading our markets at a record rate; and

WHEREAS, Foreign imports are pushing American products out of the market creating plant closings, unemployment and unparalleled imbalance of trade; and

WHEREAS, We can protect the American economy by insisting on buying American made products; and

WHEREAS, Distinctive emblems of quality American craftsmanship and service are the Union Label, Shop Card, Store Card and Service Button; and

WHEREAS, The Union Label and Service Trades Department, AFL-CIO, each year sponsors **UNION LABEL WEEK** to salute those hallmarks that are uniquely American; now, therefore, be it

RESOLVED, That September 5 - 10, 1988, be known as **UNION LABEL WEEK** to honor those distinguished emblems of American working men and women and to call upon all citizens to make a concentrated effort to Buy American and support the products and services identified by the Union Label, Shop Card, Store Card and Service Button.

Given under my hand and Seal of Office of (Mayor/Governor)

this _____ day of _____ 1988.

(Signature)

(SEAL)

UNION LABEL WEEK ACTIVITIES

The projects and activities suggested below may be staged by your organization or by any interested individual. **UNION LABEL WEEK** promotional activities which suit the interests of your community and are encouraged as follows:

*A "Union Label" contingent may be assembled to march in a Labor Day parade -- or stage your own parade. The various crafts may display products and skills on floats or carry signs with the "Buy Union - Buy Made in U. S. A." theme. Car top and car door signs can also be used -- on United States built automobiles naturally!

*You may wish to hold a Union Label Rally in connection with other Labor Day observances, display union-made products, services, distribute "Buy Union" reminders such as "Where to Find the Union Label" pocketsize cards.

*You may wish to plan a Labor Day outing, picnic, party, banquet with the Union Label, Union Shop Card ideas as its theme.

*By requesting time at a local union meeting or any other labor organization meeting to remind members of UNION LABEL WEEK by giving a talk on the importance of buying union-made, "Made in U. S. A." products. This is a good time to pass out copies of the Union Label Pledge.

*Perhaps you may choose to do a mailing to your members just prior to UNION LABEL WEEK on the "Buy Union, Buy Made in U.S.A." theme.

*By placing ads in your area's newspapers you can emphasize the importance of buying U. S. made products and services.

*When you write a letter to the editor of your newspaper, ask its readers to remember the importance of preserving U. S. jobs in the protection of the U. S. economy by avoiding imports and buying union-made products and services.

*You may write or call any person, any public official whom you know will be speaking at a Labor Day observance. Remind the speaker of UNION LABEL WEEK and ask that he or she mention the importance of buying union-made, Made in U. S. A. products as a way of helping to strengthen the economy.

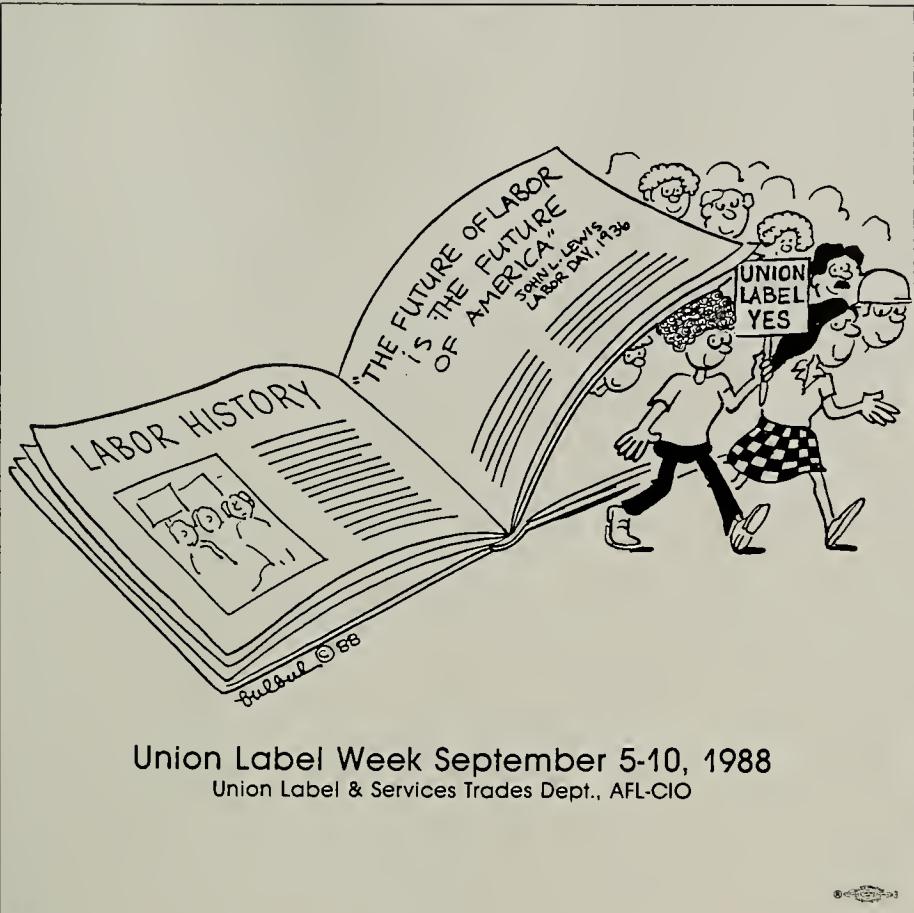
*A press release may be sent in advance to area newspapers, radio and television stations announcing UNION LABEL WEEK.

*You may wish to display cards in area store windows announcing UNION LABEL WEEK. Copy for the signs should emphasize the "keep American growing by buying union-made, Made in U. S. A. products" idea and the "use of union services" theme.

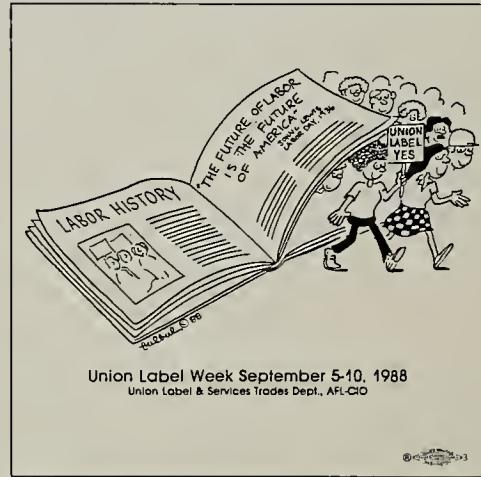
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Endorse-22.*

City Year
120 Tremont Street
Suite 201
Boston, MA 02108

Mr. Arthur Osborn
President
Massachusetts AFL-CIO
6 Beacon Street, 3rd Floor
Boston, MA 02108

Dear Arthur,

Thank you very much for taking the time to meet with Mike Brown and myself. We very much appreciated the chance to discuss City Year with you and receive your feedback and advice.

As we discussed, we are very interested in working with you and in receiving the input of the AFL-CIO. We hope to have you co-sponsor City Year For A Day on August 13th and I will pass along a proposal for that project next week.

Since we met, I have had the chance to meet with John Simmons and Bill Murphy and talk with Joe Nigro. We hope to get the involvement of their locals as well. I have also spoken again with Joe Joyce, who has found us a welder for our Mount Pleasant Street Tot Lot project, which we very much appreciate.

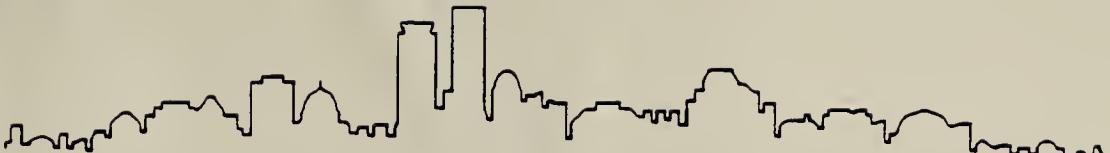
I have enclosed an invitation to our opening on July 6th. Of course, if you are free we would love to have you come.

Thanks again for your time and interest. I hope to speak with you soon.

Sincerely,



Alan Khazei



CITY YEAR

PLEASE JOIN CITY YEAR,

MAYOR RAYMOND FLYNN

AND

CITY YEAR'S TEAM SPONSORS

*BAIN & CO.
BANK OF BOSTON
GENERAL CINEMA CORPORATION
THE EQUITABLE
AND
THE CITIZENS**

AS WE OFFICIALLY LAUNCH

CITY YEAR

GREATER BOSTON'S NEW YOUTH COMMUNITY SERVICE INITIATIVE

DATE: JULY 6, 1988

TIME: 10:45 AM

PLACE: THE MOUNT PLEASANT STREET TOT LOT

61 Mount Pleasant Street
Roxbury, Massachusetts

Via Car from downtown: Take Mass. Ave. past Boston City Hospital.
Take Right on Magazine Street. Cross Dudley Street to Mount Pleasant Street.

Via T: Take Orange Line to Ruggles Station. Take #15 or #45 bus to corner of Dudley and Magazine Street. Walk up Mount Pleasant to #61 (next to monastery).

For Further Information Please Contact:

CITY YEAR • 120 Tremont Street • Boston, MA 02108 • (617) 451-0699

* Each of City Year's Corporate Team Sponsors has provided City Year with a major grant that covers the costs of a team of ten City Year participants. The costs of the City Year Citizens Team have been paid for entirely by individual contributions of \$15 and above.

CITY YEAR

Contact
Michael Brown
(617) 451-0699

MAYOR FLYNN TO OFFICIALLY OPEN CITY YEAR --

BOSTON'S NEW PRIVATELY-SPONSORED "URBAN PEACE CORPS"

50 City Year Corpsmembers to Restore Roxbury Tot Lot

Mayor Raymond Flynn will officially open City Year, greater Boston's new, privately-sponsored "urban Peace Corps" on Wednesday, July 6 at 11:00 am at the Mt. Pleasant Street Tot Lot, 61 Mt. Pleasant Street, Roxbury, MA.

Immediately following the Mayor's address and the introduction of the City Year corpsmembers, the entire corps will begin restoring the twenty-year-old tot lot.

City Year is a unique youth community service initiative. Fifty young adults, ages 17 to 21, will spend this summer helping the greater Boston community -- restoring community centers and playgrounds, reclaiming vacant lots, and assisting the homeless, the elderly and the physically and mentally handicapped.

City Year is being funded *entirely* through private support (both financial and in-kind) from private corporations, foundations, and individual citizens. Through their significant contributions, four corporations have each sponsored a City Year team of 10 corpsmembers. Fanning out across greater Boston this summer for full-time community service will be

- The Bain & Co. City Year Team
- The Bank of Boston City Year Team
- The Equitable Financial Services City Year Team
- The General Cinema Corporation City Year Team

In addition, contributions of \$15 and above from more than 1000 members of the public have made possible the City Year Citizens Team.

The 50 City Year corpsmembers, selected from more than 150 applicants, reflect the diversity of greater Boston. Over 25 Boston neighborhoods and surrounding towns (including Brighton, Dorchester, East Boston, Hyde Park, Jamaica Plain, Roxbury, South Boston, Belmont, Cambridge, Brookline, Lexington and Newton) and over 35 different high schools and colleges are represented in the corps.

Dressed in their brightly colored City Year uniforms, City Year corpsmembers will be helping themselves while they help others. Corpsmembers will receive stipends and "public service educational scholarships" totaling \$1500.

"City Year is saying to young people and the greater Boston community, 'You are needed and you can make a difference,' said Paul Tsongas, former U.S. Senator and City Year Senior Advisory Board Member. "As a former Peace Corps Volunteer, I know that City Year is a one of kind opportunity for young people."

In preparation for their summer of service, the entire corps will spend the July 4th weekend (July 2 - 5) in an intensive citizen-service training program on Thompson's Island in Boston Harbor. For four days and three nights corpsmembers will tackle a rigorous ropes course, learn about the service needs of greater Boston, engage in multi-cultural awareness workshops, perform lasting improvement projects on the island, and write their own City Year rules of conduct.

City Year has been developed from scratch as an entrepreneurial public service venture by young people -- recent graduates of college and professional schools. In the summer of 1989, City Year will expand to become Boston's first full-time, *year-round* youth community service corps. While helping to empower young people and expand the service umbrella of greater Boston, City Year seeks to provide more vitally needed experience to the concept of voluntary national service.

The name City Year reflects the idea that after spending their senior year in high school, young people should be challenged to spend a 'City Year' helping others and enriching their own lives. "It is City Year's hope," said Alan Khazei, President of City Year, Inc., "that young people will 'graduate' their City Year having gained a lifelong commitment as 'alumni' of their community."



CITY YEAR

The Service Projects

- Special Olympics Outreach -- City Year will bring the Special Olympics to city-operated Camp Joy for the *first* time. The Greater Boston Special Olympics, which has been previously been unable, due to a lack of full-time volunteers, to bring its programming to Camp Joy, will train a City Year team to coach mentally-handicapped children on a daily basis and to organize and run a Special Olympics Festival at Camp Joy's West Roxbury site.
- "Operation Home Repair" -- A City Year team, working with the Neighborhood of Affordable Housing (NOAH) and the East Boston Ecumenical Council, will help senior citizens remain living independently in their own home by performing repairs, painting and cleaning project for the seniors.
- Tobin Community Room Mural Project -- After soundproofing the walls of the heavily utilized community room of the Tobin Community School, a City Year team will paint a mural that depicts the cultural diversity of Mission Hill.
- Hispanic Needs Survey -- After receiving orientation on issues faced by Hispanics in the United States and training in the techniques of building trust and gaining information, a City Year team will help the Woburn Council strengthen its programming and services by performing a needs assessment survey of Hispanic residents of four housing projects.
- Vacant Lot Reclamation -- A City Year team, working with the Quincy-Geneva Community Development Corporation, will turn vacant lots in Roxbury into community play areas.
- National Park Historic Garden Restoration -- A City Year team will restore an historic garden and be introduced to the role of the National Parks in urban settings at the Adams National Historical Site in Quincy.
- Senior Summer Camp -- A City Year team, working with the Council of Elders, will organize and run a one week summer camp for elderly Roxbury residents in Roxbury. The team will also perform a physical service improvement project at the Council's facility.

- Project "One to One" -- A City Year team will provide friendship and one-to-one instruction in work and socialization skills for 21 severely disabled Boston adolescents in a sheltered workshop operated by Action for Boston Community Development (ABCD) at Curry College in Milton.
- Tot Lot Restoration -- City Year will restore the Mt. Pleasant Street Tot Lot, an enclosed play area in Roxbury. Members of the Mt. Pleasant Street community have operated a free summer day camp for local children at the Tot Lot for twenty years. City Year will sand and paint playground equipment, landscape the grounds, build a sandbox, restore a severely rusted play van and paint a mural on the walls surrounding the lot.
- Dorchester House Summer Camp -- A City Year team will serve as counselors for the summer camp operated by the Dorchester House Multi-Service Center.
- Painting and Outing Project -- A City Year team will paint two units of the Elizabeth Stone House's newly constructed transitional home for battered and mentally disturbed mothers and their children in Roxbury. The team will also paint a mural in the home's playroom and take the children living there on an outing.
- "Second Home" Rehab Project -- A City Year team will prepare for occupancy two units of Second Home, a transitional home for the homeless in Roxbury.
- Food Bank Swat Team -- A City Year team will sort and salvage food at the Boston Food Bank and conduct a needs outreach survey to each of the Food Bank's 400 member agencies.
- Mass Hospital Special Summer Camp -- A City Year team will provide face-to-face recreational activities for the severely physically disabled children who attend the special summer camp operated by the Mass Hospital in Canton.
- Pine Street Inn Shelter Assistance and Neighborhood Outreach Project -- A City Year team will provide companionship and help the residents of the Inn's transitional homes in Dorchester with chores such as shopping and medical appointments.



CITY YEAR

The Corps

Michelle Abshire	18	Boston	Brighton High School
Melanee Alexander	17	Brookline	Brookline High School
Matthew Axelrod	17	Chestnut Hill	Roxbury Latin High School
Sandra Barreiro	18	Allston	Mt. Saint Joseph Academy
Xenia Barrett	17	Cambridge	Cambridge Ringe & Latin High School
Spencer Blasdale	21	Mattapoisett	Princeton University
John Blatchley	17	Hudson	Lexington Christian Academy
Emilia Boles	17	Boston	English High School
Dacia Campbell	17	Dorchester	Lexington High School
Monica Daniel	17	Dorchester	Boston Technical High School
Kimberly Eberhardt	21	Boston	Boston University
Sarah Erickson	17	Lexington	Lexington High School
Elsa Escobar	17	Roxbury	Boston English High School
Katia Evariste	20	Dorchester	Boston English High School
Jose Gonzalez	18	Boston	Boston Technical High School
Daniel Halperin	17	Westwood	Westwood High School
Heather Hartshorn	19	Lexington	Colby College
Andrew Hax	17	West Newton	Noble & Greenough
Owen Henderson	17	Boston	Boston Latin High School
Caleb Jacobson-Sive	17	Boston	Phillips Academy
Charles Johnson	20	Hyde Park	Hyde Park High School
Sarah Kickham	17	Milton	Milton High School
Donna King	18	Dorchester	South Boston High School
Douglas Lewis	18	Brookline	Brookline High School
Arthur Lo	19	East Boston	St. Dominic Savio High School
John Lyons	18	South Boston	Horace Mann School
Karen Marchione	17	Brighton	Boston Latin High School
Raquel Melo	18	Hyde Park	Winsor School
Michelle Menken	17	Charlestown	Beaver Country Day School
Winda Moldanodo	17	Roslindale	Horace Mann High School
Chris Murphy	19	Belmont	Harvard University
Jyothi Nambiar	17	Sudbury	Lincoln-Sudbury High School
Gerry Nunez	17	Boston	Boston English High School
Veronica Nyhan	17	North Scituate	Noble & Greenough
Karin Olliver	18	Boston	Boston Latin High School
Regine Ostine	17	Dorchester	Cathedral High School
Alison Pritchard	18	West Roxbury	North Adams State College
Carlos Rodriguez	18	Roslindale	West Roxbury High School
David Satterthwaite	17	Boston	Phillips Academy
Rebecca Siegel	17	Boston	Boston Latin High School
David Smith	21	Brookline	Boston College
Kim Sparks	17	Cambridge	Cambridge Ringe & Latin High School
Nat Stoddard	18	Jamaica Plain	Brookline High School
Cathy Tong	18	Cambridge	Lincoln-Sudbury High School
Stacey Walsh	18	Wellesley	Dana Hall School
James Willie	21	Concord	Oberlin College
Peter Wong	17	Burlington	Burlington High School
Regan Wong	17	Newton	Newton North High School

The New York Times

NEW YORK, THURSDAY, MARCH 10, 1988

National Service, From the Bottom Up

Despite the virtual certainty of a Presidential veto, national youth service has become a hardy legislative perennial in Washington. At least seven bills dealing with the issue have bloomed again in the current Congress. While all have merit, national service may be best achieved from the bottom up rather than the top down.

A recent conference at Brown University brought together educators, governors, former Peace Corps volunteers and administrators of state and local service programs. The gathering showed the surprising number and diversity of local service opportunities that already exist. They range from New York's City Volunteer Corps, now in its fourth year, to the California Conservation Corps, so admired that even a conservative Governor has raised its budget by \$10 million.

Yet the movement remains tiny: participation in full-time programs for 18-to-24-year-olds averaged fewer than 7,000 in each of the last four years. In a nation where 3.6 million young people turn 18 each year, that's next to nothing.

How can opportunities be expanded? California passed legislation last year ordering its two state university systems to encourage all students to volunteer at least 30 hours of community service a year. That modest action seems to have set off a wave of volunteer service activity. Gov. Rudy Per-

pich of Minnesota, who brought himself and several departmental commissioners to the meeting at Brown, outlined a range of youth service plans tied to efforts to improve his state's educational system. They included, prominently, involving high school students in "mentoring" younger children, especially poor children.

On another level are efforts of people like David Battey, a recent graduate of Williams College, who, with the help of the local United Way, created the Youth Volunteer Corps of Greater Kansas City. Alan Khazei and a group of Harvard companions are at work creating City Year, a youth service program in Boston.

Such efforts don't need direction or structure from Washington as much as some form of recognition that they are part of a national youth service effort. To the extent a straitened Federal budget allows, they also need money. Instead of the Peace Corps or Vista, the model should be a national endowment or institute. It could charter local programs that meet certain standards of excellence, and make grants to encourage creation or expansion of exemplary projects.

Congress might profitably consider this alternative. Washington's contribution need not be large to be helpful.

Boston Sunday Globe

SUNDAY, APRIL 10, 1988

Volunteers hope summer vocations create urban Peace Corps

By Anne Wyman
Globe Staff

A dozen college graduates, all but one in their 20s, all but three serving as volunteers, are working full time to launch an Urban Peace Corps in Boston this summer.

The program, called City Year, would begin in July with an eight-week pilot program for 50 Boston area young people between ages 17 and 21. For stipends of \$60 a week, plus \$600 in cash or a \$1,000 scholarship, participants would work in supervised teams of 10 each on community projects that would otherwise be neglected.

If all goes well, City Year would open on a year-round basis in the summer of 1989 with a larger enrollment, a broader roster of services and increased stipends of \$100 a week, with a \$5,000 scholarship at the end of the program.

In a 10-by-15-foot office in Cambridge that was lent to the group by a member of its senior advisory board, Michael Brown, 27, and Alan Khazel, 26, talked recently of the dream they had five years ago, when the two Harvard graduates worked in Washington for members of Congress involved with the idea of national service for America's young people.

The national movement faltered when President Reagan vetoed a bill to create an American Conservation Corps, and legislation sponsored by Rep. Norman D'Amours of New Hampshire and Sen. Paul Tsongas of Massachusetts to create a commission to study a voluntary youth service failed to win passage.

"It was the best thing that could have happened," said Brown, a member of the Harvard Law Review who helped launch New York City's Community Volunteer Corps. "People began looking around at the local level. Today there are 49 full- or part-time programs around the country. All but two of them began in the last five years, and more are starting up all the time."

'We see youth service as a way to break down barriers. . . . This is citizenship at the broadest level. There are no eligibility requirements.'

The working group of five men and seven women who are organizing the program here includes a summa cum laude graduate of Tufts who prepared business strategies for a Boston consulting firm; an officer of the Bank of Boston who bicycled across the country for the Oxfam International relief organization; and a former football player for the Dallas Cowboys who is now at the Harvard School of Business Administration and is concerned about infant mortality.

The Human Environment Center in Washington reports that the combined enrollment of these programs is 50,000, and the total of their budgets \$145 million.

City Year will benefit from older programs' experience. Brown, for example, spent a year working on the start-up of the New York program. Khazel has just returned from visits to youth corps in the San Francisco-Oakland area.

The goal of City Year, said its sponsors, is to give young people of diverse backgrounds a year in which they can develop tolerance for others and pride in themselves, help their communities and lay a base for further participation in public affairs.

The programs range from the 12-year-old California Conservation Corps and New York's four-year-old City Volunteer Corps — each with thousands of workers and multi-million-dollar budgets — to the New Hampshire Conservation Corps, with 10 young people and a budget of \$25,000 for a summer operation.

The seven members of City Year's senior advisory board are Tsongas, a veteran of the 1960s Peace Corps; Matina Horner, president of Radcliffe College and a long-time youth-service advocate; T.J. Coolidge, founder of a youth-service program for Boston's public high schools; Charles Rose, director of the mayor's Youth Services program; Elizabeth Nelson, director of School Volunteers for Boston; Scott Scott Guild, housemaster at Newton North High School; and Winthrop Knowlton, a retired book publisher and assistant treasury secretary under President Johnson.

"We see youth service as a way to break down barriers," said Brown. "This is a service program, not a jobs program. Service is citizenship. This is citizenship at the broadest level. There are no eligibility requirements."

Starting small

The Boston program, said Brown, will be "entrepreneurial," starting small for maximum flexibility as it expands.

New York's program was launched in November 1984. City Year will start in July. "Young people feel they have summers to themselves and can decide what to do with them," said Brown. "Setting the tone is important," added Khazel, a law school graduate who was field coordinator for Gary Hart's 1984 presidential campaign in New Hampshire

"It's a four-page form: they have to be motivated to fill it out," Hollister said. "A lot of kids who have had jobs in restaurants and drug stores tell us they look for-

want to working with a group," she added. "They like the idea of a mixed team."

Calling on the private sector

Rather than depending solely on state or city appropriations, City Year will build on the public-private partnership embodied in efforts such as the Boston Compact, a joint program by local industries and the Boston school system that guarantees jobs to high school graduates.

"In Boston, the private sector has taken the initiative with regard to youth and social awareness," said Jennifer Eplett, a former member of Wellesley's varsity crew with two years as a financial analyst at F.F. Hutton in New York.

Eplett is in charge of fund-raising for City Year. She has garnered more than \$100,000 from private and nonprofit groups, including \$50,000 from the General Cinema Corporation, \$25,000 from the Bank of Boston and \$20,000 from the Equitable Foundation.

The team hopes to raise \$150,000 more in start-up funds. The two-year-old Volunteer Fund-Raisers Association of Boston will host a party for City Year at the Parker House on April 29.

As Eplett hangs on financial doors, her roommate, Anna Reilly, works with Lisa Ulrich, a veteran of New York's youth corps and later a project manager for the city's Financial Services Corporation. They are talking to community agencies in need of help, "asking them what they would like done if they had 10 kids to do it," Reilly said.

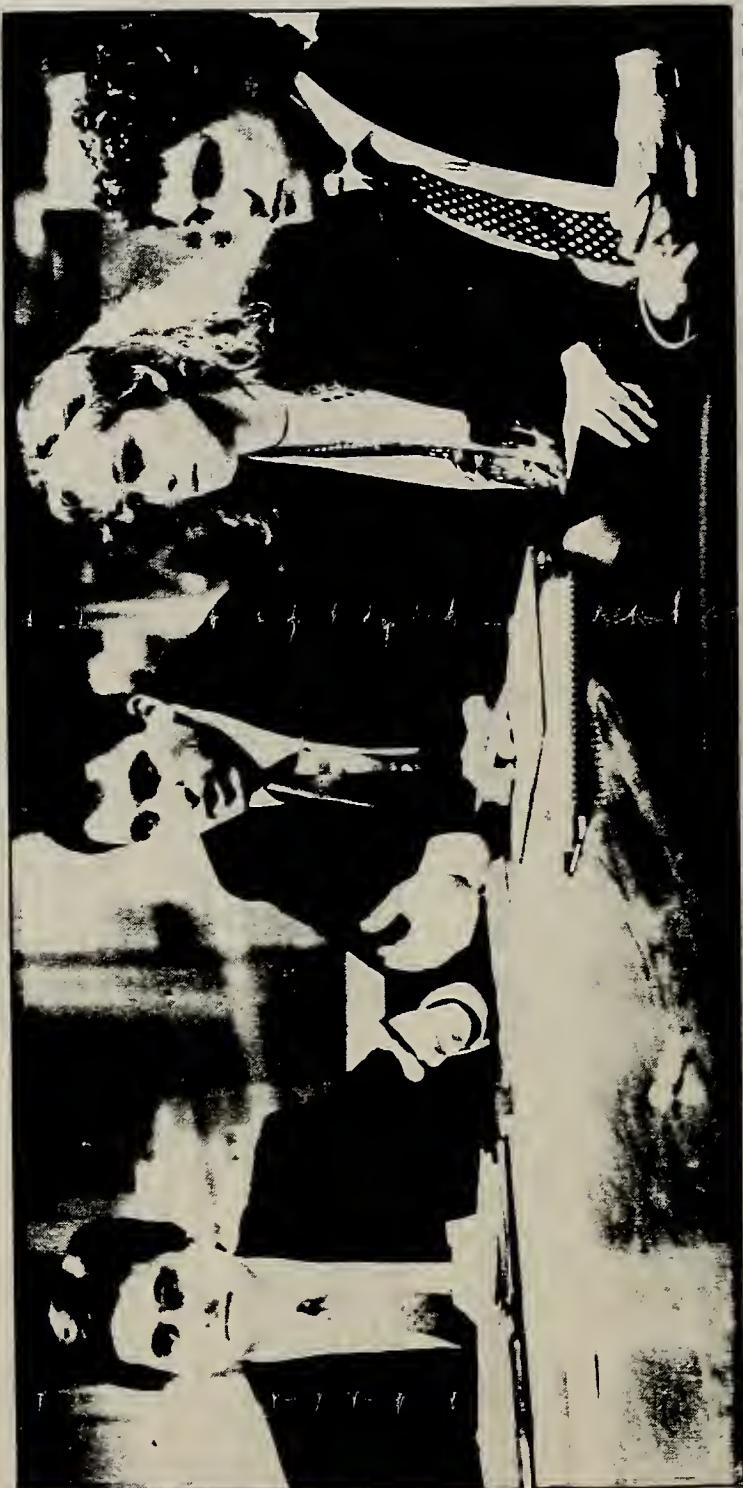
tribution. Members of City Year would go through the entire process, helping to organize deliveries, staying to talk to the people who get the food and documenting their problems with heat, electricity or medical care.

It has been estimated that, for every dollar spent on administration and pay for New York's volunteer youth corps, the city saves \$1.60 from its budget for services such as hospitals and shelters. And that, officials say, does not measure the gains in mutual understanding or community involvement.

A project at the Boston Food Bank would extend beyond stocking shelves to scheduling and dis-

"I'm amazed at the level of enthusiasm they're bringing to [the effort]," said Margaret Rosenberg of the Human Environment Center. "It looks as if they've taken the best of [New York's] CVC and other programs around the country to bring it to urban Boston."

Surrounded by a wall map of Boston and charts of onrushing deadlines, the founders of City Year talk of "expanding the service umbrella" for Boston and "empowerment" for members of City Year's teams. The word failure does not come up.



Globe staff photo/Joanne Rath and Neil Silverston. Brown spent a year working on the start-up of a similar program in New York.

Taking part in a group working to launch an urban Peace Corps in Boston are (from left): Michael Brown, Alan Khazel, Jennifer Eplett

"What we want," Brown and Eplett agree, "is to create real alumnae of the community. When we need help down the road, we'll be able to go to a graduate of City Year in the carpenters' union and that person will say yes. Or if they're in a law firm, they'll look at pro bono assistance."

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